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“Shudda, wudda, cudda be Dads”: the lived experience of older involuntarily childless men



Robin Hadley PhD, MSc, MA, City & Guilds 744, BSB

rahadley7.8@gmail.com

[@RobinHadley1](https://www.instagram.com/RobinHadley1)

www.wantedtobeadad.com

What's my privilege? I am...

- I am a involuntarily childless man: I was very 'broody' in my 30's
- 57, White-British, born working class, Lancastrian-Mancunian
- I am Hard-of-Hearing since birth with a 30% loss
- I left secondary education with 3 'O' levels
- 1997- 2008 I worked as a scientific & technical photographer
- 1 academic paper on 'involuntary childlessness'; 5 blogs; pieces in the the Daily Telegraph, the Daily Mail, and The Times; 4 Podcasts (Australia, Canada, UK, USA); BBC R4 iPM, BBC National Radio, other radio programmes
- My left ear featured heavily in the BBC Breakfast 'AWOC' piece

Acknowledgements

- To the men who participated in this study – my infinite gratitude.
- PhD studentship funded by the Centre for Social Gerontology, Keele University.
- Supervisors: Prof., Mo Ray & Dr Emma Head.
- My wife and everyone else who has supported me and that I have whinged at, moaned to, bored, & used.
- I acknowledge that terms like 'childfree' 'childless' 'voluntary' 'involuntary' 'infertile' 'old' 'older' 'elderly' 'gay' 'straight' and others I may use are contentious.

Background to study

- Demographic change: increased longevity, decreased fertility, smaller families, increase in divorce, diversity if family.
- Future impact on pensions, health & social care funding and provision (*Wittenberg et al 2008*).
- Family (adult children) provide most informal care for older people (*Phillips, 2007*).
- Potential or actual infertility has major implications for health, wellbeing and identity.
- Paucity of data on male experience of infertility (*Letherby, 2010*).
- Ageing research has focussed on older women as they lived longer, accessed more state benefits and health & care services (*Arber 2004, Arber et al, 2003*).

Childlessness

- Most societies are pronatalist: childless labeled as 'other'.
- Majority of research focuses on the 'involuntary' as it is based on those accessing infertility treatment.
- Potential or actual infertility has major implications for physical & mental health, socio-economically, identity & well being.
- Men reported as 'not interested' by infertility researchers. (Lloyd, 1996).
- Difficult to assess the level of involuntary childlessness because people who do not access treatment are not recorded.
- Men's fertility history is not collected: it is not possible to assess the level of childless men in the UK. (ONS, 2014; Cohort Fertility background notes).

Rule No 1 on how to make an invisible man: don't collect data

Unfortunately we are not able to produce statistics on the proportion of men who remain childless, as the information pulled from the Cohort Fertility background notes explains.

The methods used to create cohort fertility require use of data collected at birth registration from women on the number of previous children they have had. The birth registration system does not collect information on the number of previous children a man has had. Without this information it is not possible to produce estimates of the proportion of men who have not fathered a child.

Ageing and childlessness

- Older childless adults: '*rendered invisible in social science literature.*' (Dykstra and Hagestad 2007: p. 1275)
- Older childless adults have an increased risk of loneliness, social isolation, depression, and ill health. (Dykstra and Hagestad, 2007)
- Formerly married childless men showed poorer physical and mental health, sleeplessness, excessive drinking and smoking than men with partners. (Kendig et al, 2007)
- Long-term non-contact fathers & childless men have higher death rate through suicide and risky health and social behaviours. Linked to 'emotional instability and willingness to take risks.' (Weitoft et al, 2004: p.1457).

The Package Deal*: Ideal Masculinity?

<https://www.youtube.com/watch?v=UNOIqfEFew4>

Dove 'Manthem':

<https://www.youtube.com/watch?v=UNOIqfEFew4>

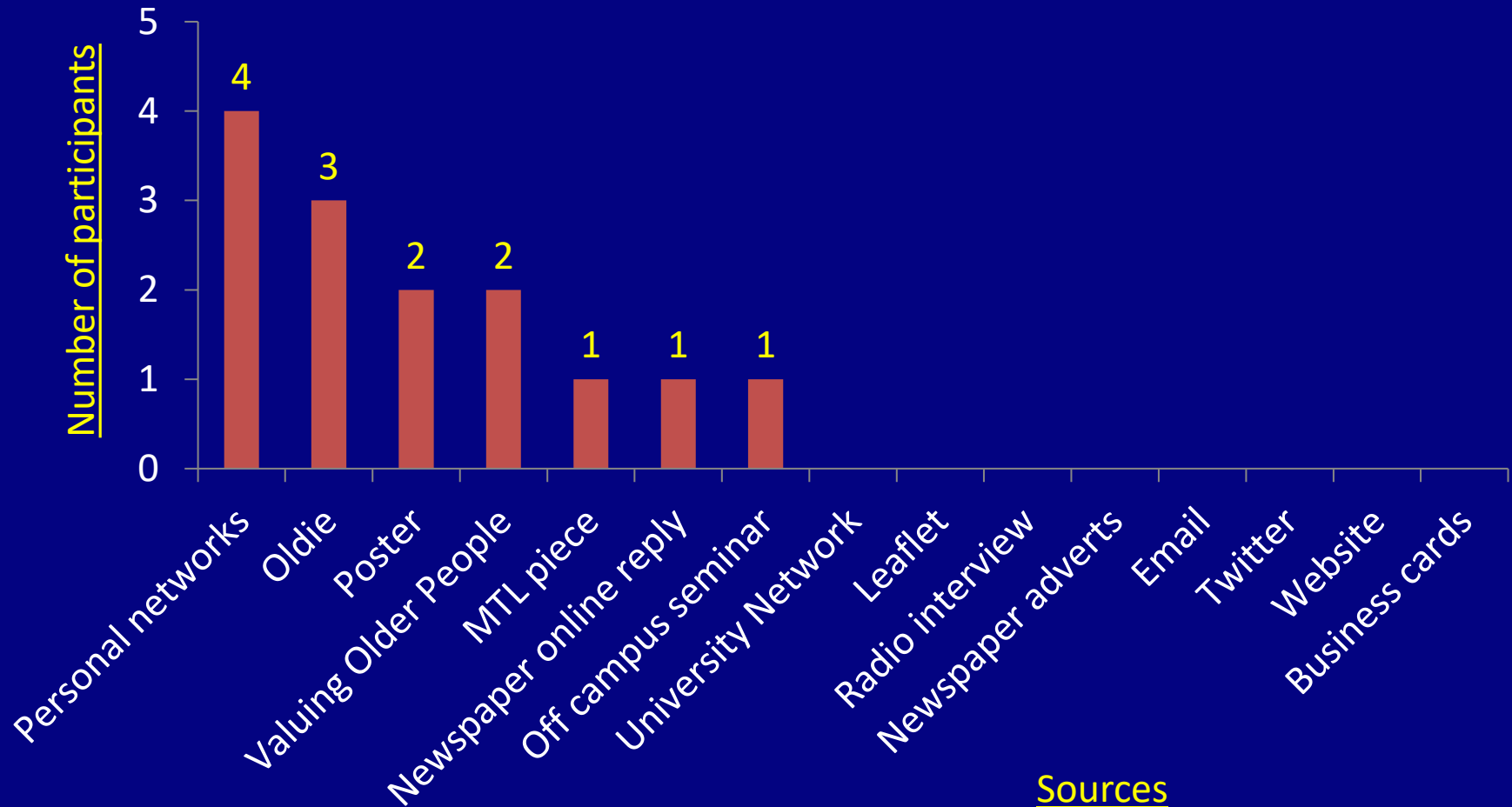
Google: *NEW DOVE MEN+CARE AD THE MANSONG* – YouTube

* (*Townsend, 2002*)

Methodology

- Draws on Chambers (2002) '*feminist life course perspective*' based on: social/critical gerontology, life course, Auto/Biography & feminist approaches.
- Semi-structured Biographical Narrative Interview Method. (Wengraf, 2001)
- Broad Thematic Analysis. (Braun & Clark, 2006)
- 14 self-defined IvC men were interviewed 2012: 27 interviews in total.
- 13 White-British; 1 Anglo-Celtic Australian.
- Age range: 49 – 82 years.
- 12 heterosexual, 2 non-heterosexual.
- 7 single (5 solo living), 7 in relationships (1 LAT).

Recruitment strategies



Attitudes to fatherhood

Attitude	Participant	Age	Relationship status
Aspirational	Stephen	49	Single
	Frank	56	Single
	David	60	Married
Uncertain	Russell	55	Single
	Michael	63	Single
Mediated	Colin	59	Long term relationship
	John	59	Long term relationship
	Edward	60	Long term relationship
	George	60	Married
	Harry	64	Single/widower
	James	65	Long term relationship
	Martin	70	Married
	Raymond	70	Single/widower
	Alan	82	Single

Social context: 'The package deal'

"I just naturally, in growing up, rather assumed I would leave school, do university, get a job, get married, and have a family." David (60)

"I always imagined I would have children." Harry (70)

"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 (70)

Pathways to childlessness

- **Economics:** *"The bloody interest rates hit 13% - so that made me delay, you know, overtures in those directions."* John (59)
- **Social clock:** *"Nobody wants a 70 year old father when you're 20."* Martin (70)
- **Biological clock:** *"We just don't want to let time go by and let nature take the decision for us."* John
- **Timing:** *"My parents had me in their 40's. So I thought it would be like falling off a log basically."* Edward (60).
- **Relationship dynamics:** *"She said, 'I never thought you are responsible enough to have children' Which, I guess, is the time I started drinking seriously."* John

Affect of childlessness

Regret: *"I've never discussed it (IVF). If people ask if we have children I say "regrettably no." I quite like people to know we did want a family."* Edward (60)

Peer network: *"It is noticeable that friends who have children drift away."* Edward

Existentialism: *"I think having kids is a way of producing a sense of continuity. Otherwise, death feels very final. If you're leaving kids, you've left something of yourself."* David (60)

Advantages: *"The advantages then, of course, are not having to plan and worry about others."* Edward

Alienation and Isolation

Alienation: *“When couples get older, they have a whole raft of experiences, you know, first day at school - if you haven't had those experiences you're shut out along with everything else. You're on the fringe - you haven't experienced: that is alien to you.” Russell (55)*

Isolation: *“People have no conception of just how isolated someone who hasn't got kids in middle age is. That's point number one to get through in your bloody PhD.” Russell*

Continuity of disruption

“It would suddenly hit me - I would see the relationship between a father and son, or a daughter, and I was thinking “Ah” I’m never really going to get that, you know ... I miss that.” George (60)

“It’s something I will never stop regretting. You know, it won’t go away.” Martin (70)

“How is a man supposed to be a man?” Frank (56)

“I’m never going to be able to say, “This is my grandson” am I?” Harry (64)

Social networks and ageing

- Relationships and social support are as important as physical health towards well being & preventing isolation & exclusion. *(Victor and Scharf, 2005)*
- Network size and type affect health: those with least resources tend to have poorer health behaviours. *(Wong and Waite, 2015)*
- Marriage is important to well being in later life – if the relationship is ‘good’. *(Wong and Waite, 2015)*
- Older men especially see their partner as a primary source of care and support. *(Arber, 2004; Arber and Davidson, 2003)*
- Older men are more likely to have very small networks of one person or less compared to equivalent women. *(Phillipson et al 2001)*

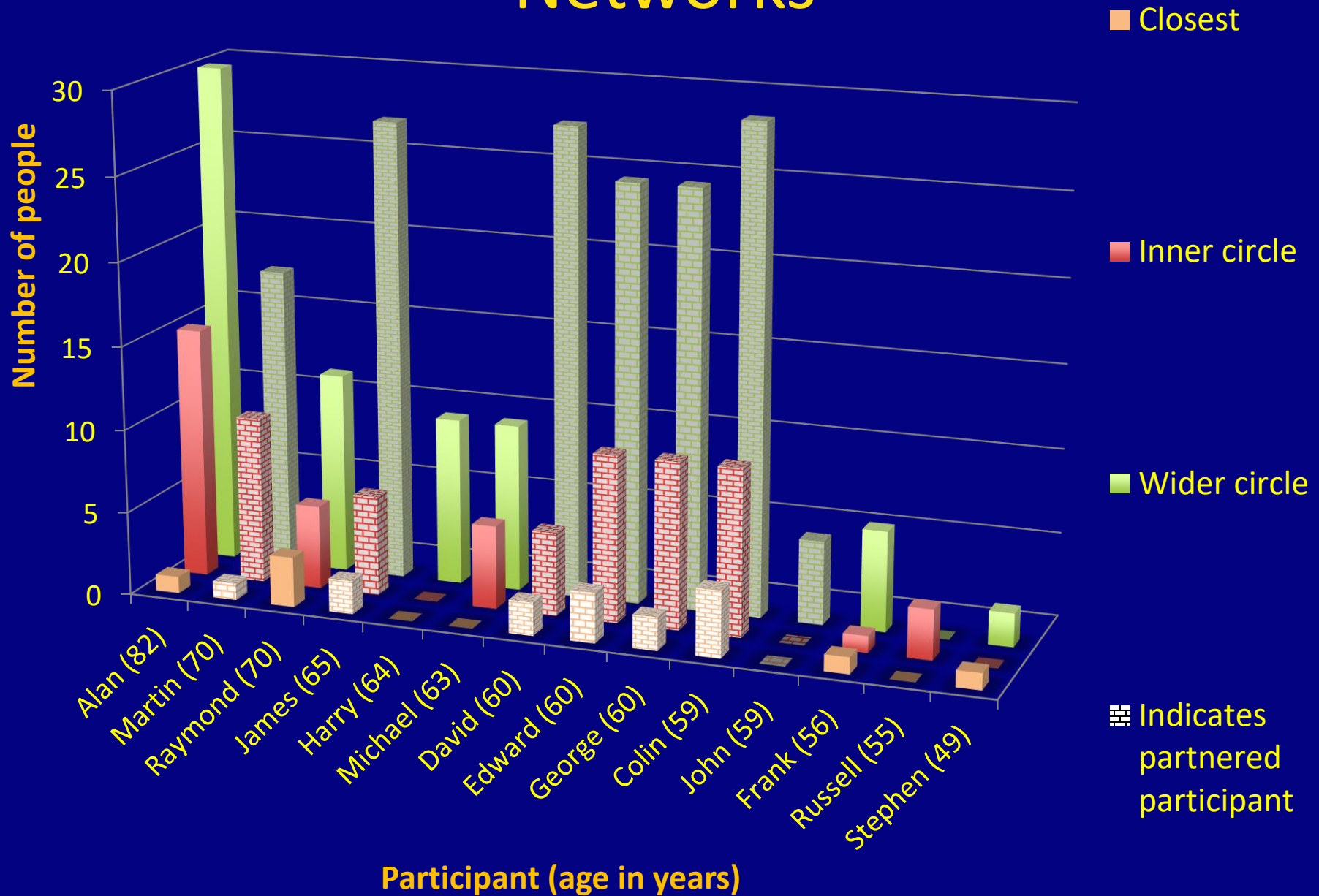
Life course: The British Package Deal....

<https://youtu.be/WEbV97xAPsY>

Google: Rustlers Advert 2016 80 Years of Torment Commercial:

<https://www.youtube.com/watch?v=WEbV97xAPsY>

Networks



Continuity of family dynamics

Colin: *"I have a great relationship with my partner and my brothers, they are most important. My family was, and is, extremely close. Very happy, and fun, childhood."*

John: *"My childhood [...] I was not abused as such, but it was aversive [...] even now, my mum, it's still a bloody monster. My middle brother I can't have any respect for him at all...Cousins, I would be hard-pressed to recognise - it's been so long. So now relative strangers."*

Singletons: partnered & bereaved

Martin: *"I think my wife and I are very much for each other, so we tend to be our own social field. How do we socialise? Family. Of course it's my wife's family, 'cos I've not got any. And that's really just her siblings saying, "Let's visit", and the surrogate grandchild."*

Harry: *"There's no inner circle, no. [...] Loads of activities around here from people we knew. I've dropped out of that because I hate going on my own. [...] A problem – I'll solve it. I'm the only one - I don't know anyone. [...] There's two long time mates that I got that, if I rang, would come at a click."*

Organisations influence on social networks

Alan: *“There is a core of people that is my relatives and some o' the closer people from the group. The ones that 'ave been there probably from the beginnin’.”*

Raymond: *“I've the people at the pub and I've got the group. With the group, if you're not well [...] I ring and then they know I'm not just, sommat's happened, I've not gone. I had a couple of phone calls back, see if I were alright, you know. You think, “Well somebody cares,” you know? [...] It's most of my life - going to the pub or the group. So, I mean, you take that away from me and just sit here forever? Then might as well curl up and die now, you know?”*

Social networks and childless people

- Older childless are not disadvantaged when their health is good. If health deteriorates the informal support declines and the formal care does not take up the shortfall. *(Albertini & Mencarini, 2014)*
- Partner-less older men are more likely to be placed in residential care than equivalent women. *(Arber and Davidson, 2003)*
- Concern over older men's isolation has led to projects such as 'Men in sheds' & 'Hen Power'.
- 'Out in the City' 50+ type groups offer support to older LGBT people.
- More-to-Life: support network for people post unsuccessful IVF treatment.

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Aspirational

“You think, “Well, if I produce kids at the age of 61 then by the time they’re off to University I’ll be 80.” And if I make it beyond 80, which I hope I will, I mean to fund them through university.” David (60)

“I’ve become, sort of, more aware then of how nice it can be to have children, you know, from the families and the people I know.” Frank (56)

“It’s more about whether, you know, I could find a viable partner...” Stephen (49)

Uncertain

“Now I'm 55, 15 years have gone and, in the back of my mind, the candle's been going, or the light's been getting dimmer and dimmer of me ever being a father.” Russell (55)

“If my mind does wander to what might have been, or what might be, then it is still with that one thought: can I have a child at my age now?” Michael (63)

“So as I get older, I am aware of the fact that it's great when you're fit, but if you are fatherless, there is no son or daughter checking up on you, phoning you, knocking on the door, or saying, “You look terrible - go to hospital.” Michael

Mediated

- **Age:** *"Since I was about 47 I accepted that it won't happen."* Colin (59)
- **Health:** *"That was when I found out I was infertile and probably had been from being a teenager."* Martin (60)
- **Relationship:** *"Liz [ex-wife] stated that she didn't want children, I just quickly put those inklins' to one side..."* James (65)
- **Sexuality:** *"I could never have been a [biological] father, I don't think so."* Alan (82)
- **Loss:** *'If you have a child there would be a part of Helen still walking the streets.'* Harry (64)

Grandfatherhood?

Aspirational and uncertain men related grandfatherhood to biological primacy:

“I cannot recall having any thoughts about being a Granddad because there was, or is, no possibility of it.” Michael (63)

Four of the nine mediated men had experienced a form of fictive grandfatherhood. The remainder took similar positions to the aspirational and uncertain men.

Grandfatherhood 1 & 2

Latent: *"I mean I think in a way of the two little ones in the pub as the grandchildren I've never had. I don't say that in the pub to anybody, I don't even let them know it, or their Dad."* Raymond (70)

Adopted: *"They asked if they could adopt me as a granddad. That lasted 3 years - it was great. I felt I belonged - that's what I miss."* Alan (82)

Grandfatherhood 3 & 4

Proxy: *"Liz's grandchildren appeared on the scene - I discovered what a pleasure that is, you know? I'm keenly interested in them, as I would be if they were my genetic grandchildren, I think. Liz's ex-husband, he's 'Granddad', I am 'Pappous' - the Greek word for Grandfather."* James (65)

Surrogate: *"I said to the parents, 'You know, this baby when it comes hasn't got a paternal grandfather. Can I be a surrogate grandfather?' Which I am. They call me 'Sgrampy', which is an 'orrible word, but its surrogate grandfather, surrogate grampy. And particularly, I'd say, the surrogate grandchild, is a big part of the social thing"* Martin (70)

Future

Health: *“Who's gonna take us to the hospital? Who's gonna push us? When we fall on the floor, who's gonna pick us up?” Michael (63)*

“You're suddenly aware you're no longer invincible.” John (59)

Threat: *“I don't want people saying, “Oh, he's a bit of a paedophile, this one, looking at the kids”.” Raymond (70)*

Legacy: *“There is a richness of family history, which it's nice to pass on, again no one to pass it on to.” David (60)*

“To be brutal death is the future... I'd like to see my surrogate granddaughter grow up... 15 years will take her to 18. You can see them to be an adult then, can't you?” Martin (70)

Ageing masculinity

“How is a man supposed to be a man?” Frank (56)

Masculinity: provider, active, virility, strength, heterosexual, non-feminine, emotionally distant, subordination of others = ‘Ideal’ type.

Ageing associated with loss of: control, independence, strength, and physical and mental health.

Older men are viewed as both genderless and a sexual threat (Walz, 2002).

Emergent Masculinity: Men now behaving in ways that counter/reject the hegemonic masculinity ideal/the old ways. (Inhorn, 2012)

Mosaic masculinity: Older men adapt parts of masculine scripts to form their masculine identity. (Coles, 2008)

Summary

1. Influences on routes to childlessness: complex intersection between agency & structure: age, social status, relationships, economics, culture, health & timing of events. 'Social clock'.
2. Attitude and behaviours: informed by gender, sexual orientation, social expectations, upbringing, relationship skills, relationships, economics, location & social networks.
3. Quality of Life: influenced by health, relationships & social networks: chronic co-morbidities felt older than their age; most men with siblings & partners had larger networks than those without; positive impact of support groups e.g. MTL & +50 LGBT.
4. Policy: The childless not recognised in policy & practice documents. Masculine stereotypes embedded in service delivery may add to exclusion, isolation, & stigmatisation of men.

Ageing Without Children (awoc.org)

- Grass roots organisation campaigning for the recognition of 'AWOC' people. Includes those childless by circumstance, choice, bereavement, disruption, & self defined.
- More people now in their 40s will age without children than ever before; estimates are between 20-25%.
- The population of older people in the UK is increasing.
- Assumption in health and social care policy and practice that older people will have family members to fill the gap left by the state.
- The ageing childless are not recognised in policy and practice documents.
- Seeking funding to conduct more research.

Thank you for listening!
Any questions?



rahadley7.8@gmail.com

[@RobinHadley1](#)

www.wantedtobeadad.com

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