

Raising healthy men and curbing risk taking behaviours: *A challenge for SA's Boys' Schools?*



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Glen's story



The status of men's health

Sex differences in mortality and morbidity are well documented with a large body of literature showing that men have a poor health status compared to women.

(Coles et al., 2010)

Men have a shorter life expectancy than women.

(Arias, Anderson, Kung, Murphy, & Kochanek, 2003; White & Cash, 2004; World Health Organisation, 2002)

The mortality rate for most leading non-natural causes of death are higher among men.

(Jadad, 2001; Kochanek, Murphy, Anderson, & Scott, 2003; Payne, Swami, & Stanistreet, 2008).

How do we account for this?

Early explanations focused on **sex differences** (i.e. the genetic and biological make-up of men).

Subsequently it has been suggested that **gender differences** account for the comparatively poorer health status of men (i.e. hegemonic masculinity is the problem).



There is something about being a man in our society that leads males to...



- Engage in risk taking behaviours
- Avoid health promoting behaviours
- Participate in dangerous work
- Ignore the needs of their body
- Avoid seeking medical assistance
- Default on treatment



Boys are socialised into manhood

In all cultures and societies, a boy's initiation into manhood begins when he is born, at the moment he is identified as a boy.



This label determines how he is treated as well as the expectations that others have of him.

Schools actively participate in socialising boys into manhood



Boys learn how to perform masculinity

As a boy is socialised into manhood he learns society's rules for being a man.

These rules are internalised as a set of beliefs and attitudes which define what it means to be male.

Adherence to these rules causes males to perform masculinity in a way that compromises their health and well-being.

Conceal your vulnerability Silence your fear and pain



"If you want other guys to respect you then you have to put on a brave face and remain cool, calm, and confident no matter what."

(BW, 17)

"I was tense and anxious, uncertain of how I would react when the critical moment came. Flinching or crying was a sign of weakness and stigmatised one's manhood. I was determined not to disgrace myself, the group, or my guardian. Circumcision is a trial of bravery and stoicism; no anaesthetic is used; a man must suffer in silence. A boy may cry; a man conceals his pain."

(A Long Walk To Freedom)



Treat your body like a machine

"Your body is a machine, to be treated harshly and with furious discipline. To be sick is to be weak. To listen to the sufferings of the body is to be a sissy or spastic. To be demonstrative of any physical feelings at all is to render oneself vulnerable to mockery."

(The Direct Path, Harvey)



For many men, there seems to be a certain stoic pride in how much one can abuse one's body without complaining or showing discomfort. This abuse takes many forms; working long hours, enduring physical pain and neglecting the body's need for rest and care.

For a man to slow down and take account of his body would be to fail in a world that values only continual achievement and success.

Men's bodies are tough

There seems to be a belief among some people that men's maleness endows them with an inherent toughness to face the hardship of war and killing and to endure pain and physical hardship.



The male body's absent presence



**Masculinity has a particular shape,
distinctive postures, and ways of
moving and speaking.**



Be independent and stand on your own two feet

“I think a boy becomes a man when he becomes more responsible and he can take care and look after himself. He does not need his mom to go and do stuff for him. He can do things for himself and does not need to ask for help. He becomes more independent – he is on his own.”

(WT, 16)

“Many boys seem to believe that they must mask their uncertainty and ignorance because these are a sign of weakness. Asking for help is not ok, it is like an acknowledgement of defeat, a sign that you have lost control.”

(GE, 17)

Dominate and take control

“To be a man is to be in an elevated position of power.”

“Control is for many men the defining feature of their masculinity, any suggestion or threat of being out of control challenges the very essence of what being a male is all about.”

(On Men, Clare.

Separate from mom and all that is feminine

“To be called a mommy’s boy is a big put down, an insult; it implies a lack of independence, strength and manliness.”

(WT, 16)



Assuming the role of patient requires us to surrender control, concede vulnerability, assume a child-like status of helplessness and put ourselves in the hands of someone (the doctor) who is positioned as more knowledgeable and powerful and who acts on us as if we are passive objects.



The gender straight-jacket

Within this understanding men are pathologies and masculinity is problematized

Males are seen as passive objects that absorb culture rather than co-create it.

We are left with the conclusion that we need to change the way boys are socialized into manhood.



If hegemonic masculinity is the problem?



We need to consider and attend to those practices in our schools that promote the idea that masculinity is achieved by adhering to beliefs that work against health and well-being.

Sport

In particular we might need to take a closer look at how sport is positioned and performed in boys schools.



What is the lasting impact of boys' experience of sport and exercise in our schools?

Participation in sport and exercise promotes healthy development

Participation in physical activity on a regular basis is reported to have considerable positive effects on physical and mental health

(Crone, Smith, & Gough, 2006, Daley, 2002; WHO, 2012)

Participation in sport is also said to promote social development and provides opportunities to learn a range of interpersonal and self-regulatory skills.

Idealisation of sport as a path to health

When we idealise sport we obscure the ways in which sport can also marginalise, damage and harm individuals.

This may be particularly true of competitive sport especially when it resembles organised warfare.

Sport is a deeply gendered activity



When boys start playing competitive sport, they are learning more than just a game; they are being initiated into an organised institution that consists of rules and norms about how one behaves and acts as a sportsman.

Participation in competitive sport is a fiercely political act

In competitive sporting environments there is an inherent hierarchy and network of power relations which prize particular ways of being and privilege some individuals.

This creates and reinforces a social order in which there are strict rules and roles and a preoccupation with selection and winning which inevitably marginalises and excludes some individuals.

Could the way we tend to “do sport” in our schools leave many boys with the belief that exercise is something you do to show domination rather than something you do in pursuit of health?



What impact does the fiercely competitive sporting culture in Boys' Schools have on boys' relationship to their bodies, attitude towards health and beliefs about the role of exercise?

What behaviours and attitudes are taught and rewarded? Who is excluded?

What would be lost and gained by shifting the focus to non-competitive sport?

What about the health of men in South Africa?

It would seem that the trends reported internationally are also true for men in SA.

The picture in SA is, however, significantly different in a number of ways, notably when it comes to patterns of violence, accidents, injuries, suicide and sexual assault (all of which also have a distinctly gendered pattern).

Violence and injuries

South Africa, a country not at war, faces an unprecedented burden of morbidity and mortality arising from violence and injury.

Violence and injuries are the second leading cause of death and lost disability-adjusted life years in SA, after HIV/AIDs

(Norman, et al., 2006)

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- In SA the injury death rate is **157.8 : 100 000** of the population
 - This rate is higher than the African continental average of **139.5 : 100 000** population, and is nearly twice the global average of **86.9 : 100 000** population.

(Norman, Matzopoulos, Groenewald, Bradshaw, 2007;
Matzopoulos, Norman, and Bradshaw, 2004)

SA's high injury death rate is driven mainly by:

(1) Interpersonal and gender-based violence

Nearly half SA's deaths due to injury are caused by interpersonal violence. This is four and a half times the proportion worldwide.

(Peden, McGee, Sharma, 2002, Seedat et al., 2009)

(2) Road traffic injuries

Injuries from traffic accidents are the 4th leading cause of death in SA accounting for a quarter of injury related deaths. (Norman, et al., 2006)

(3) Self-inflicted injuries

Suicide accounted for approximately 9.6% of all unnatural deaths in SA (Bantjes & Kagee, 2013).

(4) Other unintentional (accidental) injuries

Including falling, drowning and fires.

Violence in SA is profoundly gendered

- Young men (aged 15–29 years) are disproportionately engaged in violence both as victims and perpetrators. (Seedat et al., 2009)
 - The rate of homicide of women by intimate partners is six times the global average. (Seedat et al., 2009)
 - Half the female victims of homicide are killed by their intimate male partners and the country has an especially high rate of rape of women and girls. (Seedat et al., 2009)
 - 80% of suicide completers in SA are male. (Bantjes & kagee, 2013).
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“yes.... **BUT!**”

It is not all men – just some of them!

it is not our boys who become these men!

Assuming:

We are not raising men who are the perpetrators of this gendered based violence.

Then we need to ask:

What are we doing to raise men who will take a stand against this and not participate in gender based violence as silent bystanders?

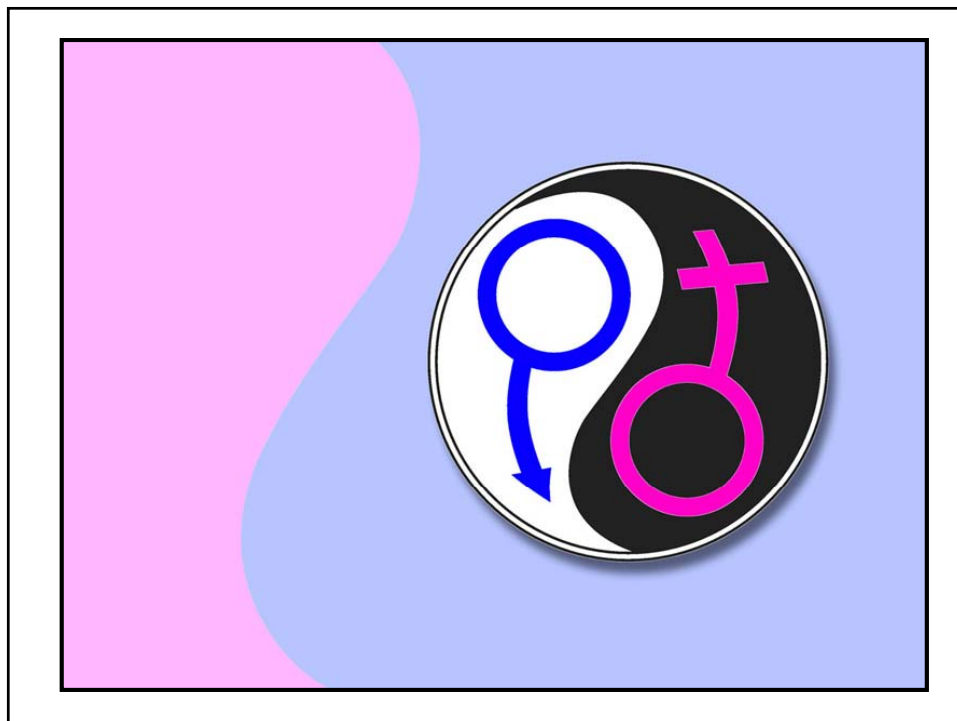
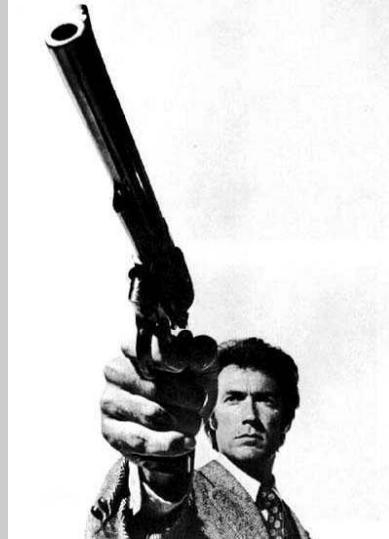
How do we account for this?

Experts in the field theorise that there are 7 social dynamics that support the pattern of violence in SA:

1. Widespread poverty, unemployment, and income inequality
2. Access to firearms
3. Inadequate law enforcement
4. Exposure to abuse in childhood
5. Widespread alcohol misuse
6. Weak parenting
7. Patriarchal notions of masculinity that valorise toughness, risk-taking, and defence of honour

(Seedat et al., 2009)

threatened masculinities



Risk taking behaviour among SA's youth

This generation, the world over, are said to be the most educated youth generation in history.

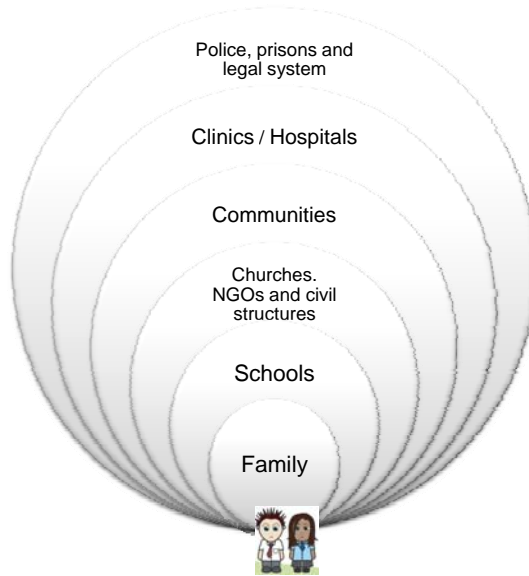
Youth generally, and in SA in particular, are exposed to a variety of influences which lead them to engage in behaviours that place them at risk.

Such risk behaviours include: violence, substance use and misuse, risky sexual behaviour, unhealthy eating habits and inadequate physical inactivity.

This pattern of risk taking behaviour among SA's youth shows a distinctly gendered pattern with significantly more young men placing themselves in harms way.

(The Second SA Youth Risk Survey: MRC, 2010)

Is this the responsibility of schools?



What are schools for?

What's the role of the IBSC in promoting the health of SA's men?

- Ensuring the physical and psychological safety of learners on the school premises.
- Providing education about health and well being (keeping in mind that scare tactics don't work).
- Monitoring and strictly and consistently policing behaviours which threaten health and wellbeing.

What's the role of the IBSC in promoting the health of SA's men?

- Hand the responsibility back to parents and working in partnership with parents were appropriate.
- Actively petition government to step-up to its responsibility to meet the psycho-social health care needs of the country's youth.

What's the role of the IBSC in promoting the health of SA's men?

- Adhere to evidence based best practice when designing and implementing policies which have an impact on sport/exercise, health, and psycho-social wellbeing.
 - Help to build a knowledge base about boys' physical and psychological health.
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