

Shifting Masculinities amongst Men Diagnosed with Breast Cancer: A Multi-method Phenomenological Inquiry

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Background

Since 1997, breast cancer has been the most common cancer form in the UK, accounting for almost a sixth of all cancer cases (CRUK, 2016). Incidence of the illness in men is proportionally low, affecting around 1:143 males to females, with approximately 350 new male cases presenting annually in the UK compared to around 55,000 female cases (NHS, 2014).

As a result, breast cancer in men is frequently overlooked within both lay and expert healthcare systems (Iredale et al., 2006) despite being responsible for more male deaths annually than some male-specific cancers, e.g. penile and testicular cancers (CRUK, 2016).

Underacknowledged both clinically and socially as a threat to men's health, breast cancer in men persists as a critical health issue, with complex ramifications physically, psycho-socially and psycho-sexually for those affected.

Research exploring men's breast cancer experiences and life beyond the illness event remains limited. Therefore, this research asks 'How do we understand the experiences of men diagnosed with breast cancer?' and aims to advance knowledge regarding men's meaning-making of breast cancer and masculinity, and to give voice to what is currently an under-researched, minority group.

Method

Semi-structured interviews together with 'visual voice' (see Pauwels 2015) – an adaptation of Photovoice methodology (see Wang & Burris, 1997) using photographs authored by the participants themselves.

Participants discussed a series of self-selected photographs at interview, in addition to answering questions from a pre-devised interview schedule of 20 questions.

31 men were recruited from across the UK through Breast Cancer Care, Leicestershire Partnership NHS Trust and social media platforms; 20 contributed verbal-visual accounts and 11 verbal-only, generating between them 175 photographs and 50+ hours of verbal data.

All data were analysed together using Interpretative Phenomenological Analysis (IPA, Smith et al., 2009), and findings were discussed and cross-checked by the lead researcher's supervisory team.

Three superordinate masculinities were identified: 'threatened and/or exposed', 'protected and/or asserted' and 'renewed and/or revitalised' masculinity (Figure 1) along with 16 supporting subthemes (Table.1). Our findings are being disseminated to cancer charities and clinical oncology services in the UK with a hope that they will improve the treatment and support of men who experience breast cancer in the future.

Findings

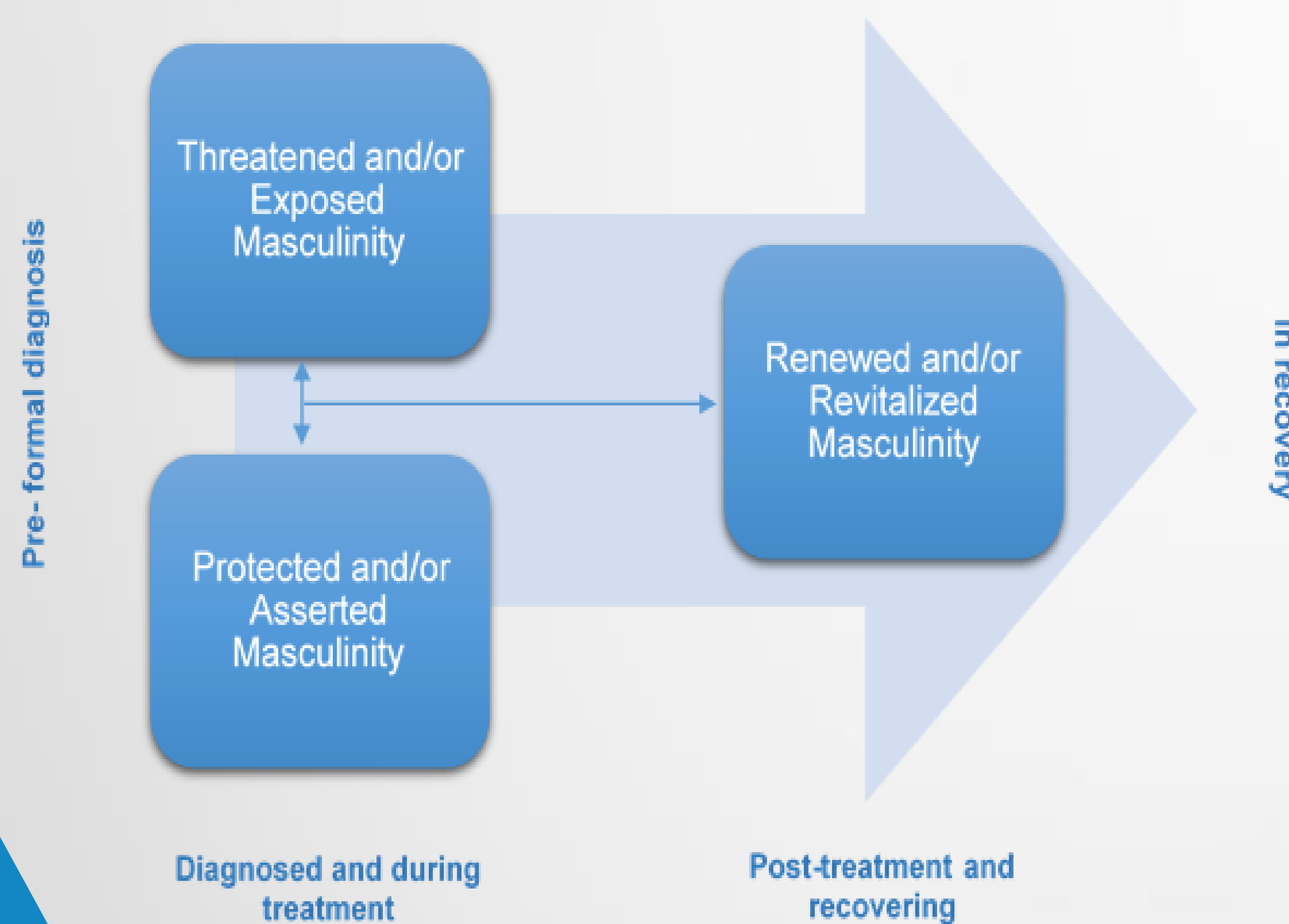


Figure 1. A schematic representation illustrating how men transition between the three superordinate masculinities identified

Table 1: Subthemes corresponding to each of the three superordinate masculinities identified.

Threatened and/or exposed masculinity	Protected and/or asserted masculinity	Renewed and/or revitalised masculinity
Marginalised from multiple sources	Business as usual: Placing importance on maintaining normality	Embracing new opportunities and life experiences
Clinically vulnerable: Mishaps, challenges and concerns	Downward comparisons: Breast cancer as worse for others	Life beyond breast cancer
Physical reminders: The embodied breast cancer experience as a man	Breast cancer as 'just another illness': Downplaying the diagnosis	Greater appreciation for life, the self and others
Breast cancer as a constant: Lasting impressions of the illness episode	"I didn't need it": Rejecting support from others and agencies	Renewed identity: Becoming a changed/better man
	'Being' male: Stereotypically reasoning why he developed breast cancer	Engaging with breast cancer activism and advocacy
	Needing to prove male credentials	New and improved relationships following breast cancer diagnosis



'We're mythical beasts... we don't exist'

Threatened and/or Exposed Masculinity



'I'm a man's man... one o' the lads'

Protected and/or Asserted Masculinity



'There is light at the end of the tunnel'

Renewed and/or Revitalised Masculinity

Discussion/Conclusions

Using the model (Figure 1), we show how these interconnected masculinities are performed and utilised by men from pre-diagnosis right through to the recovery stages of the illness, as they manage, make sense of, and live through breast cancer. The findings show how the breast cancer diagnosis causes men to feel threatened, particularly in terms of their masculinity, prompting them to protect and assert their male selves to uphold their gender status. However, as they progress towards recovery and begin to reconstruct their lives post-illness, paradoxically, the men relax their performance of masculinising practices as they discover benefits associated with the breast cancer experience. This, to the researchers' knowledge, is a new finding which serves to inform breast cancer research and clinical and care practices, as we look to improve men's illness experiences and outcomes.

Acknowledgements

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Further reading

Quincey, K., Williamson, I., & Winstanley, S. [2016]. "Marginalised malignancies": A qualitative synthesis of men's accounts of living with breast cancer. *Social Science & Medicine*, 149, 17-25.

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