

# Research on how elders' health can be affected by models of masculinity in the rural environment

## Study reveals that men and women present different behaviors in relation to illness and the process of ageing

By *Nathalia Cassola*

The aging process is often viewed in a negative way by men, who reject the fact that their bodies are no longer as resilient as they used to be. Social constructs of gender can affect both sexes, in different ways and to different degrees. The stereotyped concept of masculinity originated from these constructs and sustained by our society can create difficulties for older men to accept illness. During her doctorate, at UFRGS Graduate Program in Nursing, nurse [Andréia Burille](#), who is also professor at the University of Rio dos Sinos (Unisinos), chose small rural communities in Rio Grande do Sul to analyze the different tactics of tending elderly patients when they become ill. According to her, "masculinity brings benefits to men, but also brings a lot of damage. Men aren't expected to be weak, or to cry, or to do a number of things. There is a lot of effort in hiding their suffering because of such expectations." In order to prove that aging is only a numerical count and that it has no effect on their bodies, some individuals can ignore health problems until they become too serious and inevitable. This project aimed to discuss gender issues and their effect on health and illness, to observe how men deal with the weakening of their bodies and to evaluate the impact of diseases on the social condition of men.

As member of a rural family, the researcher always wanted to work with the rural communities and their singularities. Rural environments are permeated by symbols, which also form an identities and ways of life for their residents. "Thinking rural-community interests was always something that I, as a nurse, kept in mind as important," she says. In partnership with the University of Vale do Taquari (Univates), Burille looked for the municipality in which she would conduct her research based on the number of elderly people it possessed. The chosen one was Deutsch, fictitious name chosen to preserve the identities of the participants. Located in the Região dos Vales, the city has less than 2,500 inhabitants; more than half (54%) residing in rural areas and about a quarter of the population is over 70 years old.

Having worked with human health for the past 10 years, Burille spent nearly a year involved with the community and the chosen respondents. For two months, she lived in the house of a widow of the region, who helped her understand more about the habits of the residents. Not only did she want to talk to the older men of the region about their individual experiences, but she also wanted to understand their community. Since almost all of the residents are immigrants or German descendants, Burille was quickly labeled as "gringa"<sup>1</sup> due to her Italian descent. Gaining their trust was a delicate process, with the support of the community agent in the region, who accompanied her during the initial phase of getting to know the families. "Any research that will be conducted in rural communities has to rely on the local agent, so that people can trust the researcher and avoid feeling uncomfortable," she says. After a period of coexistence with the residents, which occurred during the months of January and February 2015, Burille continued to return to the city every weekend until October. They told their stories in confidence to her, who in turn made a commitment to keep them anonymous.

### Period of immersion

The research began at a third age meeting in which Burille explained to the elderly the idea behind her work. With the exception of one interviewee who personally asked to be included in the study, all other men were chosen based on a draw, focusing on people who have or had agriculture as their main occupation. The interviews were guided by a semi-structured question script. On her first visits, Burille took a tape recorder with her, but she noticed the discomfort of the elderly with the equipment and their hesitation to speak when they knew they



Study about gender issues and their repercussions on health and illness – Photo: Sgt Andrew Lee/U.S. Air Force

would be recorded. In order to achieve more natural interactions, which involved the rest of the family as well, she adopted the field diary to record relevant information. After each meeting, Burille used to leave with a large amount of data that had to be transcribed and analyzed. The main feature that she noticed in the members of the German community was their organization, a common trait among most of the interviewees. "People from the countryside like to have everything prepared and organized for visits. They would always ask me to tell them when I would go. There was even one of them that showered and dressed up. One day I arrived about ten minutes late, and he said he thought I was not coming," she recalls.

Based on a literature review conducted prior to the period of interviews, Burille was able to identify two distinct types of behavior among elderly men who are dealing with chronic illnesses. The body becomes vulnerable over the years and meeting the expectations of manhood – according to which men must be self-sufficient providers to and protectors of their families – becomes difficult. Hegemonic masculinity has the same expectations of men in different contexts and times of lives, disregarding their conditions. When questioned about what is being a 'man', respondents did not know how to answer the question, as if masculinity were something natural and intrinsic to them, and not a mere social construction. During aging, it is important to re-signify this concept so that men can enjoy better this cycle of their lives.

Given the lack of conditions to continue working, elders might deal badly with aging and illness. They neglect their own health to prove that nothing has changed and that they are still able to continue their lives normally. By doing so, they put their health at risk and tend to seek medical help only in extreme situations when they are at imminent risk. Elderly men put a lot of effort in concealing their own frailty; they even feel shy and ashamed of their bodies and choose to omit symptoms until they become visible. For this very reason, men also have less adherence to long-term treatments or activities that promote health.

However, Burille's research unveiled a second behavior in which rural elders build some self-confidence from receiving recognition of the people surrounding them. The networks that they take part in stimulate the care of both themselves and others. "Recognition makes people feel happier and better, and also able to deal with the adversities they have to face. Recognition is essential for people to be able to build patterns of care," points out Burille. Being socially accepted and valued helps them have self-respect and take better care of their bodies rather than ignore their illnesses.

According to Burille, ageing in the rural environment is also a social challenge. By having the opportunity to tell their stories and share them with their families, the interviewees felt valued and recognized. "It was an opportunity to talk and also to show that aging will not make them less manly or be seen as fragile," she says. For the elderly from these regions with difficult access to health care, people with whom they socialize become more important during this period. "Aging is also a reflection of what you have built in life, of the relationships you had. All this gets more intense in this period of life," comments the researcher.

**Time to say goodbye**

Through these experiences, these stories of overcoming obstacles and sufferings, one can think of ways to improve the training of health professionals to improve their capacity to deal with elder male patients, especially in rural areas. It is necessary to make these professionals aware of the masculine specificities, promoting actions not only of treatment, but also of care – a differentiated and sensitive care, from which one must see beyond the body to perceive the individual and references he has from the environment in which he lives. According to Burille, "there has been a change of perspective, a need for Brazil to adapt in order to deal with the growing population of elders. This needs to be an agenda within the training and within the daily life of public services." A frequent answer from the respondents of the research was that health professionals, when they are talking about aging, only speak of illness and reinforce a negative view of this period of life. The quality of the care also involves the satisfaction of those who seek it, and it is imperative to look for better ways of promoting an active and healthy ageing in any situation.

After all this time working with the residents of Deutsch, the researcher knew it was time to start the process of removal from community. To celebrate the completion of the research, Burille held a lunch party for the interviewees and their families, a way of thanking them for being collaborative and welcoming. She also put together a photo gallery frame – with photos she had taken during research interviews and old photos of the youth of her male respondents – and gave it to them. Although the survey was over, she kept in touch with the people she met in the process, both by phone calls and by visits. "Today I visit them not because I'm a researcher, but because I created a bond with them," she says. A network within the community was created due to the research; they met and talked about the participation on the project. To thank her for the opportunity to share their stories, they surprised Burille with gift – a basket full of goods produced by them. "The best outcome of my research was the time I was able to live with people and learn from them as they learned from me."

**Thesis**

Title: [When masculinity meets ageing: experiences of recognition and care in the daily life of elder male individuals in rural areas \(In Portuguese, Quando a masculinidade encontra o envelhecimento: experienci\(a\)ções de reconhecimento e de cuidado no cotidiano de idosos rurais](#)

Author: [Andréia Burille](#)

Advisor: [Tatiana Engel Gerhardt](#)

Department: Graduate Program in Nursing – UFRGS

Key-words: Nursing. Ageing Process. Health. Public Health.

*Translated by Vitória Coelho Tarouco, under the supervision and translation revision of Professor Elizamari R. Becker (PhD) – UFRGS/IL.*

Universidade Federal do Rio Grande do Sul

Av. Paulo Gama, 110 - Bairro Farroupilha - Porto Alegre - Rio Grande do Sul

CEP: 90040-060 - Fone: +55 51 33086000

Directions

