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Political Sciences

Men, Poverty and Lifetimes of Care

An overview of a study funded by the Leverhulme Trust



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Key Points

• This study currently explores men's care responsibilities across the life course in low-income families with men in multiple generational positions.

 It builds on analysis of two existing datasets about men's care responsibilities in low-income families that are stored in the Timescapes Archive, called Intergenerational Exchange and Following Young Fathers.

 Twenty-six men living on low-incomes have been interviewed for a follow-on study. The sample consists of men who are teenage fathers, mid-life fathers (either biologically related or step-fathers) and kinship carers (with acquired legal parental responsibility).

• Emerging findings indicate that rather than being largely absent, as is often assumed, men do provide care in low-income families. We have to look longitudinally and intergenerationally to reveal their presence in intergenerational patterns of care, and to see the factors that contribute to men gaining responsibilities for family members, both within and across households.

Anxieties about father absence and the so-called 'crisis of fatherlessness' appear to have taken on a renewed significance and sway in the post-2008 recession and austerity contexts. Such anxieties typically implicate working-class men, perpetuating stereotypes that they are most likely to be uncaring, feckless and indifferent to family life. As with other accounts of low-income life, these representations have become widespread and "overburdened' with powerful and unspoken assumptions' (MacDonald, 2008, 236), yet they are often underpinned by limited or problematic interpretations of evidence.

The lack of research evidence and academic attention to men who are fathering in contexts of poverty and disadvantage (Ridge, 2009) only serves to reinforce this impression. Despite evolving expectations about men's increasing involvement in family life (Henwood & Shirani, 2012), supported by evidence of positive change in relation to men's engagement in more intimate practices of fathering, it is unclear what barriers and opportunities men in low-income families face as potential caregivers, particularly when social and financial resources are limited.

The Study

Using existing and new qualitative longitudinal evidence about men's care responsibilities in lowincome families, this study aims to identify how and when men in low-income families engage in practices of care and the barriers, enablers and contexts that influence their involvement. This longer-term view reveals the temporal, relational and social processes that are implicated in shaping men's interdependencies in poverty circumstances. Attention to men's care responsibilities in multiple generational positions also aids in advancing a critique of the problematic absence/presence binary that is frequently used to frame good and bad fathering.

Briefing Note

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Key objectives

• To address an important and under researched topic – men's care responsibilities in low-income families;

• To explore men's care responsibilities both longitudinally and from multiple generational positions to understand their care trajectories and diverse patterns of care;

• To understand the impact that men's insecure work trajectories have on their familial and social relationships over time;

• To address these gaps in knowledge in ways that are theoretically engaged, empirically innovative and policy relevant.

Study Sample

The men recruited to this study were identified as living in low-income families and as having care responsibilities for children, either as biological fathers, primary caregivers or as carers with acquired legal responsibility. They were recruited in consultation with health and social care providers in the northern English city where the study was conducted. The sample of 26 men included; young fathers (aged 25 and under) who were transitioning into fatherhood; mid-life fathers, some of whom were step-fathers; and kinship carers; men who were seeking to be, or had gained legal responsibility for grandchildren and other family members when those children's parents were no longer able to care for them.

Emerging Findings

• Low-income family life creates opportunities for men to be more involved in care while also making it simultaneously challenging. These men often make decisions about their care responsibilities in constrained financial circumstances and face distinct hardships,

• Many of the men described multiple care responsibilities both within and across different households. Having limited financial resources sometimes forced these men to make difficult decisions about which family members they could support financially and which they couldn't,

• The men who become kinship carers in particular, give up work to take on what are often unanticipated care responsibilities for family members. While they receive a small financial allowance, it does not cover the increasing everyday costs of caring for children and is time limited,

• Current welfare provision and support does not adequately acknowledge or support men as capable carers, reflecting traditional gendered assumptions that women care and men work,

• Recent policy and welfare changes made under austerity, do not account for complex family dynamics. For example, single fathers with disabled children that were interviewed for this study were less able to absorb changes to disability allowances than couple and were less able to find flexible, part time work.

Conclusions

• Men do provide care in low-income families in a diverse range of generational positions that become more visible if we look longitudinally and across generations.

• The austerity context has produced the conditions in which men may be required to take on care responsibilities but must also decide how to allocate limited resources both within and across households and within different sets of relationships and interdependencies.

• There is a need for further recognition of men's care responsibilities in low-income families and the processes upon which these patterns of care are contingent.

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