Being at Risk or Being a Risk? Marginalized Masculinity in Contemporary Social Work

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Social worker 1: He’s a boy, for starters.

Head of staff: Mhm.

Social worker 1: Everyone knows about the case, right? We don’t have to say too much about their background. So, where should we start?

Social worker 2: Alright, risk-factors...on an individual level. OK, he is a boy. Actually, we don’t know that much more about him.

Social worker 1: He’s been a problem at school.

Social worker 2: Mhm. He has difficulties at school. (Herz 2012)

In the preceding dialogue, a couple of social workers are discussing a case concerning a young boy together with their head of staff. The discussion took place at a staff meeting at a social-services office with staff working with children in distress. To get an overview of the case, the social workers discusses different so-called risk and protective factors in the child’s everyday life. This example is from the beginning of that discussion. The fact that, biologically, the client is a boy is highlighted and treated as synonymous with being at risk. When the social worker stresses that the client is a boy, this is noted on a whiteboard by the head of staff under the heading “risk”. One reason the social workers put so much emphasis on the child being a boy is because the evidence-based assessment system they use states that boys are more likely to be exposed to and to get involved with “antisocial” behaviour (Andershed and Andershed 2005, 2010).

Two things seem to happen, and both are associated with an alleged connection between the systems, methods, and knowledge being implemented and evidence-based practice as “the best available knowledge” (Herz and Johansson 2011a, 2012; Herz 2012, 2013). First, gender
is used as a static variable—that is, being a biological man supports certain assessments or decisions. Secondly, the use of methods, tools, and systems as part of an EBP-discourse is, by definition, “best available knowledge”—that is, that the tools, systems, and methods take on gender issues is automatically considered or treated as being based upon best available knowledge regardless of whether this is the case or not. This is what is happening in the dialogue above: being a boy is interpreted through the use of a method, marketed as being evidence based. By this logic, masculinity is only represented through the child’s biological sex, and, as a static variable, it also predicts certain behaviors and social conditions.

Even if the assessment in some terms might be considered statistically valid, when translated down to individuals lives, their assessments and decisions based on this statistical assumption might lead to the same constructions of masculinity being constantly reproduced. For example, boys often receive treatment and other interventions to a greater extent than girls (Brunnberg 2002). Further, boys and girls tend to get different interventions based solely on gender assumptions, as is the case with so-called male role models sometimes used as an intervention method for young boys (Hicks 2008; Johansson 2005; see also Hellman and Odenbring’s chapter in this book).

When discussed in relation to marginalized positions connected to social problems, social exclusion, or social vulnerability, masculinity often tends to be approached as a static and unquestionable position. However, what this approach often veils is, in fact, rather unclear and messy. For instance, this is the case as certain notions of masculinity are often approached both as the underlying cause of a problem and as something desirable. One might claim that certain notions of masculinity are both contributing to the “problem” and becoming part of the solution. This is, in turn, substantiated by masculinity being approached as static.
This chapter will discuss what happens when the social work profession tries to manage marginalization among boys and men. Instead of an approach that takes different discourses of masculinity into consideration, boys and men are interpreted through hegemonic discourses of masculinity and simply seen as being the risk instead of being seen as exposed to risk. On the one hand, I will claim that such an approach could be argued to lock men into a certain position of marginalization, whereby gender is synonymous with being in need of help by social services. On the other hand, such a static approach could be argued to conceal marginalization among men since their situation, feelings, and experiences might be subordinated to their gender position. Further, the chapter will discuss how notions of masculinity need to be put into motion to be able to capture several positions of marginalization as well as more hegemonic positions.

The chapter is based on an ethnographic study that took place at a social services office in Sweden during one year (Herz 2012). This material is discussed using official statistics and policies as well as current methods and systems used in social work. The reason for this approach is that the social workers taking part in the ethnographic study often referred to different methods, systems, and policies based on statistics and aggregated data in their work. To be able to understand the discussions, the assessments, and the decisions made by the social workers, their different narratives need to be read through the lens of the methods, systems, and documents referred to.

In the next section, I discuss masculinity as being a risk: Is there any truth behind the assumption that being a boy, or being a man, equals being at risk? Thereafter, gender and masculinity in general in social work will be discussed through previous research and empirical examples. I then discuss evidence-based social work and its possible effect on gender issues in order to understand the ongoing development of social work. In the following section, “It could be a risk, being a boy”, we return to the social services office to
see how this development tends to be interpreted and understood, as well as its effect on the practice of social work. Lastly, I discuss an alternative approach to masculinity and marginalization before concluding the chapter.

**Boys and men being at risk**

To say the least, social work is a disparate field; for instance, social workers are to be found in schools, health care, and community work or in the fields of social services working with social vulnerability or social problems all over the world. In terms of social problems, men are almost always overrepresented as being the offender or being the cause of social vulnerability. Men are more likely to be convicted of indictable offences than women, they are more likely to both put themselves or others in danger, and a great majority of all sex offenders are male (Herz 2014; “Offending and Masculinity: Working with Males” 1990).

Concepts such as risk, aggressiveness, power, contestation, or violence are all notions closely associated with masculinity or how men behave. Men and violent crimes are almost synonymous because men, as mentioned, are overrepresented as perpetrators. In Sweden, 83 percent of all prosecution decisions concerns men, and in terms of who is sentenced to prison, this number is even higher, about 90 percent. The more serious and violent the crime, the greater the chance of it having a male perpetrator. Similar numbers are possible to see across large parts of the world (Herz 2014). In Australia and in the US, for instance, the proportion of men in the prison system is about 93 percent in each respective country (Australian Institute of Criminology 2015; Federal Bureau of Prisons 2015).

However, being this strongly associated with being an offender or a risk taker could put men in a position that makes them almost impossible to include into different notions of marginalization, regardless of their situations. In this section I will, as an example, mainly dwell on one statistical fact, namely, that of over-mortality among men in general and among
young men or boys in particular. The mortality among men is higher than among women over the whole life cycle, but tends to peak between 20 and 24 years old. The reason for this is often connected to lifestyle issues, manifest through, for instance, accidents, taking risks, and committing suicide. Although using an example from Sweden, similar patterns are seen in many other countries as well (c.f. Miniño 2010).

**[INSERT FIGURE 2.1 HERE]**

Figure 2.1. Over-mortality (in percent) among men in Sweden, 2014 per year at time of death. Source: Statistics Sweden

When presented as aggregated data, the over-mortality among young men or boys, in particular, could support the view that being a boy equals being at risk. In this case, the risk of dying prematurely is nearly three percent higher for men between 20 and 24 years old (see figure 1). There is a tension between interpreting this as an effect of men “being men” and of some men more than others being affected by dominant conceptions of masculinity. This data provides no tools on how to interpret this risk or how to transform this knowledge into everyday professional practice with men or boys seeking help or support. To be able to interpret this phenomenon, we need to focus our attention elsewhere. One possible approach to understand this peak in over-mortality is through masculinity studies. Thus, the lifestyle issues mentioned above, such as taking unnecessary risks, need to be understood in terms of different notions of masculinity. Otherwise, marginalization and exposure among men risks simply being interpreted or reformulated as an expression of a “lack of masculinity” based on static notions of masculinity and gender. In the everyday practice of social work, however, masculinity is seldom being analyzed, instead it is often used and understood as a static position.

**Gender and masculinity in the field of social work**
Feminists and postcolonial theorists have, over the years, formulated a major critique of social work, accusing it both of being gender blind and of neglecting critical perspectives on power (Herz and Johansson 2011a, 2011b). An increasing number of academic studies on these issues show that social work practices often are influenced by stereotypical views on gender and ethnicity (Burck and Gwyn 1995; Dominelli 2008; Hicks 2008; Sue 2006). Often gender is treated as a complementary fact in terms of two different categories of people complementing each other with their different traits and conditions (Mattsson 2005). Gender is also often seen as being static, meaning that it is seen as unchangeable over time (Orme 2003; Zufferey 2009).

Scourfield (2003) has, for instance, studied how fatherhood is being constructed in the social services in Great Britain. His results indicate that there are six different discourses on men and fatherhood used in the social services. The first one, “men as a threat”, has to do with men being considered a threat towards the children or the mothers, which in turn tends to be transmitted on to the social workers when talking about the men. Other discourses, which are not as common, include the following: “men as no use”, “men as irrelevant”, “men as absent”, and, finally, the two more positively connoted, “men as no different [parent] from women”, and “men as better [parent] than women”. Although the last two discourses are more positive towards the fathers, they are bound to be related with when mothers are seen as insufficient. According to Scourfield, this is the only way fathers are being constructed as good, or as good enough parents. Masculinity becomes almost synonymous with being a bad father, which in turn prevents the fathers from being positioned as in need of help and support. To be able to inhabit such a position, the mothers need to be interpreted as being bad parents.

Another example of how gender is interpreted in social work is related to sexuality and masculinity. The expectations on men to always want sex and to feel confident about their
sexuality tend to affect how these issues are approached in social work and in schools. In this case, there are two different approaches: one connected to the notion of male sexuality as being dangerous and another to how male sexuality also is seen as being desirable. Male sexuality as dangerous is connected to male violence, rape, and sexual dominance, while the second approach has to do with the aim to get girls to enjoy sex as men do (Bäckman 2003; Mattsson 2005). Mattsson (2005) conducted a study on addiction treatment centers in Sweden and found how male sexuality were interpreted as a possible danger regardless of whether it was a male resident meeting a female staff member or a male staff member meeting a female resident.

In the everyday practice of social work, these approaches to gender affect how treatments, decisions, and assessments differ according to gender where men tend to get different treatments compared to women (Bates and Thompson 2002; Kullberg 2002). In contrast, another visible example is related to how gender often is not at all present in analyses of the client’s or patient’s situation, which in turn risks reproducing an unreflective view of gender as static and complementary and of people as in need of gender-specific treatments (Dominelli 2002; Herz 2012). The workplace itself is also often organized in a way that further reproduces these patterns. Work assignments could, for instance, be organized based on gender or reserved to social workers of a certain gender (Mattsson 2005; Nylander 2011).

Together, these patterns create a situation where masculinity in social work is almost becoming synonymous with someone being active, in power, and, as we shall return to soon, a risk. The implications of this are that men, through this logic, almost cannot be in a more marginalized position. When someone is expected to be in control, in power, or dominant, they cannot at the same time be considered a victim. Sundaram, Helweg-Larsen, Laursen, and Bjerregaad (2004) call being a victim an antithesis of masculinity.
When talking about gender issues and social work, it is important to remember that social work is, by definition, a normalizing practice to a great extent, something that often seems to get forgotten both by social workers as well as researchers (Payne, Adams, and Dominelli 2002; Payne 2005). Social workers tend not to be on a mission to change society and resist power structures; nevertheless, they do have to confront and reflect upon these structures. Their profession is therefore stuck between upholding societal norms and practices and needing to confront and change some of these structures. Feminist and postcolonial critique of social work has focused on the strong tendencies of essentialism and naturalism inherent in this clinical field of practice. An essentialist view on masculinity is that of men and masculinity being associated with, for instance, being in power, and agency challenges the ability for men to be in a marginalized position or even to be in need. Because of this, social work practice needs to remain critical and reflexive towards gender stereotyping, especially since the professions close connection to the welfare state and how social work is normalizing to such a degree that it tends to influence and affect society at large (Tilly 2000).

Aggregation as evidence

Recent developments in social work practice all over the world have been geared towards implementing what is called evidence based practice (EBP). Although there is no agreement on how to define EBP, or even evidence, the most common definition is probably one where evidence is seen as “scientific support” on the effects of treatments, assessments, or the use of specific methods. EBP is, to this same logic, seen as the accurate, openly reported, and judicious use of the best available evidence (at the moment) on decision making regarding treatments to individuals or families. In professional social work, EBP is often translated into three parts: best available knowledge, the client’s experiences and preferences, and the professional’s experiences and abilities (Gambrill 2010; Haynes, Bryan, Devereaux, Guyatt and Gordon 2002; Morago 2006; Mullen and Streiner 2004).
Although the definition often used actually is opened to a variety of different kinds of science or knowledge, what is considered evidence based is, despite this, often connected to certain kinds of studies, which could be traced back to the concept’s origin in medicine. Randomized studies (RCT studies) are often ranked and valued higher, and methods or tools based upon these studies or meta-studies consisting of several RCT studies are being promoted to a higher extent (Herz 2013; Humphries 2003; Soydan 2011). This often means that different systems, methods, and knowledge are being integrated into social work practice based on this kind of data, which in turn has consequences regarding how issues like gender or masculinity are approached. Although the tools differ between countries, the implementation of different more or less systematic tools and EBP can be noted in countries such as Sweden, Denmark, Finland, the United States, Canada, the UK, Australia, and New Zealand. Furthermore, other countries such as China seem to be moving in the same direction (Gray, Plath and Webb 2009; Herz 2012; Krejlsler 2013; Kufeldt, Vachon, Simard, Baker and Andrews 2000; White, Hall and Peckover 2008)

As mentioned previously, two things seem to happen related to the alleged connection between the systems, methods, and knowledge being implemented and EBP being interpreted as “the best available knowledge” (Herz and Johansson 2011a, 2012; Herz 2012, 2013). First, is how “being” a biological man is interpreted to support certain assessments or decisions. Second, using evidence-based methods, tools, and systems is, by definition, “best available knowledge”, which tends to include the methods, tools and systems take on gender.

The first point is what happened in the introductory quote: being a boy was interpreted through the use of a method, marketed as being evidence based. By this logic, masculinity is only represented through the child’s biological sex, and being a static variable, it also predicts certain behaviors and social conditions. The second point is more complex. When EBP is being implemented into the everyday practice of social work through the use of different
methods, systems, or tools, these often say something also about gender and masculinities. Even if statements made on gender are not to be considered based on “best available knowledge” or if it is unclear what knowledge or research they are based upon, they are still able to be interpreted as stemming from best available knowledge and thus as evidence based. This is possible because of the symbiotic relationship between EBP as a concept and the idea of “best available knowledge”.

One such example is the way gender is approached in the widely used system “Looking after Children” (LAC or LACS). Different versions of LAC are being used in the UK, Sweden, and Canada, among other countries. The LAC system states that children need positive same-sex role models to develop a positive identity (Basarab-Horwath 2001; Socialstyrelsen 2006). Because the system is being implemented as part of an EBP discourse, it could be interpreted by the social workers as being based upon the “best available knowledge”, regardless of whether or not this is the case. In terms of same-sex role models, researchers actually challenge the use of same-sex role models, especially because of its questionable view on masculinities (Hicks 2008; Johansson 2005).

The implementation of EBP in social work seems to affect the view on gender in both ways, from notions of gender being static based on aggregated data to gender issues being considered evidence based regardless of whether or not this is the case. Previously, I claimed that men are often over represented in terms of being the offender or the cause behind social problems and that the most highly rated available data used by social workers is aggregated data, where masculinity is approached as static. With this in mind, it is easy to draw the conclusion that because of boys and men being statistically over represented, being born a male contains an inherent risk or that being a boy is a risk.

“It could be a risk, being a boy”
Being male means an increased risk of antisocial behavior, and gender differences can be observed as early as after the age of two. … Many studies have shown that antisocial behavior is more common and more pronounced among boys than girls during childhood (Andershed and Andershed 2005, p. 49, my translation).

This quote is from another evidence-based tool, called Ester, which is used for assessing children and youths at risk for either developing or already showing signs of antisocial behavior (see Andershed and Andershed 2010; Andershed et al. 2010). With the statistics in mind, this statement is reasonable. The question is, however, how this statistical fact and these kinds of statements are being transferred into the everyday practice of social work and whether it affects the agency and possible assessment outcomes for men and boys (and in extension for women and girls).

Marcus: But do [you] approach gender at all?

Birgitta: We talk about it [when we do] risk and protective, when we do assessments based on risk and protective factors, or when we consider it.

Marcus: In what way?

Birgitta: But it could be a risk being a boy that is something we can talk about sometimes.

Marcus: This makes me a bit confused; this is from [Ester – an evidence based assessment tool] isn’t it? And you don’t work with “Ester”, do you? But you’ve got the data from there, haven’t you?

Birgitta: Mhm. They’ve established how being a boy is a risk-factor (Herz 2012, p. 121 my translation).

This interview with Birgitta, who works with children in need at a social services office, is interesting since it highlights how knowledge from different systems, tools, and methods
could spread across the workplace. Knowledge that could be used by social workers even if they themselves lack specific knowledge on the tools in question. Birgitta has not been trained in using this specific tool, but she uses the knowledge “they’ve established” in her work with clients.

For the boys themselves, this means that they are seen as a risk or as inheriting a biological risk factor solely based on their gender. A “fact” that could be used to argue for specific assessments, decisions, and treatments. That is, men are receiving care and support customized to their needs (i.e., gender). Gender-specific treatments are, as mentioned, common in social work. This means that although masculinity is seen as an underlying cause and even though it influences the kind of support that is made available, it is, at the same time, impossible to change as long as it is considered as being something intrinsic and static connected with being a boy. An approach whereby masculinity, by definition, results in being a risk makes it hard for boys or men to free themselves from such a position. One might even say that they risk being locked into a marginalized position. Being a man equals being a client or a patient.

However this is not the only approach to masculinity as a risk that becomes problematic. Although using the same explanatory models, the result becomes somewhat different. In the following conversation with two social workers working with family violence at a social services office, the close connection between masculinity and being in power or being a risk becomes observable. The result, however, is that men who are not in power and who are exposed to risks afflicted by others could find it hard to inhabit a marginalized position at all.

Sophia: I mean, I had, but it was one of the “gangsters” so to say, but he came to me once and told me, very frankly, how his woman had beat him, and she had probably done it quite substantially here over the ear, and he was probably in some pain. He wasn’t scared
or anything like that, but it was very… And I started laughing, and that wouldn’t have happened [if it were a woman].

Ingrid: And then you say, “But what had you done [to deserve that]?” (said in a sententiousness voice)

Sophia: Yes, exactly, and then its, well… You would, of course, not have acted like that if it was a woman telling you the same thing. (Herz 2012)

Sophia talks about when one man told her about how he had been beaten by his partner and how she breaks out in laughter as a response to his story, even though traces of violence were clearly visible on his face. The man in this example might be at risk, afflicted by his partner, but the situation is interpreted through a hegemonic and static view on masculinity where men are not at risk, but rather pose a risk. There are a couple of effects from this way of dealing with gender. First, there is a “lack of language” for men to talk about being a victim or in need of help without, at the same time, risking to violate certain norms of masculinity (Herlof Andersen 2008; Knutagård 2009). This is what happens when the man tells Sophia he had been hit by his partner. Second, it is possible to see how social vulnerability that is not associated with masculinity is reformulated or reinterpreted to fit existing models of explanation (Herz 2014). This is what happens when Ingrid talks about how the blame for what happens in these kinds of situations often are placed back on the man. When already existing models of explanation for—in this case, family violence being equal to men abusing women—can’t be used, the situation needs to be re-interpreted. This is what happens when Ingrid says that if a women abuses a man, he must have done something to her first that caused her to hit him. Although not being able to inhabit a marginalized position, it is likely that this approach could lead to men’s experiences being marginalized.

These approaches to masculinity tend to strengthen already rather static images of gender (Hicks 2008). But an approach where the men themselves are problematized rather than
notions of masculinity is also sometimes supported, to some extent, by researchers of men and masculinity. For instance, this is the case when claiming that it is important to attribute the violence of men towards men. Jeff Hearn (1998) is one of the researchers that used to emphasize the importance of using the term “men’s violence”, although this was later further nuanced (see Hearn and Whitehead 2006). The reason for using “men’s violence” was, according to Hearn, its preciseness. It is men being violent, and it does not propose anything being biologically male, nor does it propose a “specific” male violence. Instead, he continues, it acknowledges the plurality of men’s violence (Hearn 1998).

On the one hand, Hearn makes a valid point when he argues for the use of “men’s violence” since masculinity is often used by men themselves as a defense or as an explanation to their actions (Catlett, Toews and Waliiko 2010; Hearn 1998). However, on the other hand, a focus solely on men’s violence does not in itself disrupt the confusion between men, males, and masculinity and their relationships to violence or to marginalization, social vulnerability, and social problems in general.

**Notions of masculinity as risk – an alternative approach**

During assessment with men, social workers are encouraged to actively address not just the concept of gender, but the patient’s perception of what it means to be a man—and what aspects of masculinity most inform their behaviours, serve as sources of strength, present them with challenges, and most accurately characterize who they are, regardless of whether or not other people would necessarily understand those same traits as “masculine”. (Winnett, Furman and Enterline 2012, p. 320)

In this final section, I claim that, rather than focus solely on boys and men or being biologically considered a male, it is important to take people’s own notions of masculinity,
gender, and identity into consideration. Too great a focus on “being” a man without at the same time deconstructing masculinity does not open up for change, but, rather, the opposite. I claim that it is important to openly address gender and discourses of masculinity with the client or patient as well as what Winnett et al. (2012) propose: to examine and deconstruct the client’s or “patient’s perception of what it means to be a man”.

This is not the same thing as downplaying men’s violence or their own liability as perpetrators; this could still be important, but for social workers it is just as important to create spaces for change. If a man behaves “like a man”, according to what social workers consider to be masculine behavior, and thus receives treatment for being a man or behaving like a man, then what kind of change is possible? Rather than focusing on specific discourses of masculinity and taking their impact for granted, social work needs to shift towards putting discourses in motion together with the client or patient being subjected to social work.

Actually you know what – with this girl, I mean she like brought out like the anger, I don’t know. It’s just I turned into a whole different person when I was with her. It like, you know, she woman, and she the man, you know what I’m saying? She wear the pants and I wear the skirt. I can’t have that, you know what I’m saying? I wasn’t raised up like that, you know? So I had to tell her and put her in her place. (Catlett et al. 2010, p. 114)

Let’s return to men’s violence. As mentioned, it is common that men in treatment use masculinity as a way to exonerate themselves from responsibility (Catlett et al. 2010; Hearn 1998). The man in the quote above does exactly this by emphasizing how she became the man and he the woman (“wearing the skirt”), ending up in him feeling he had to react. Although it could be argued that discourses of masculinity could be used to alienate men from their actions, there is a difference between being a discourse and to understand and change the way discourses act through subjects (Hearn and Whitehead 2006).
This is an important difference, social workers need to embrace different discourses of masculinity and how people actively relate to them in their everyday life to be able to affect their behavior and in the long term maybe change discourses on what it means to be a man altogether. Instead of handling the over-mortality among boys as boys being a risk, because of their gender, it means that social workers actively approach how boys relate to their identity and possible notions of masculinity. This opens up for men being both in positions of power and agency as well as being in more marginalized positions.

Research on suicide and depression among men has shown a similar approach being valuable. Suicide and depression among men sometimes seems to be related to their masculine identity, or more accurately, to their loss of certain kinds of masculine ideals. This could manifest itself through a loss of a job or maybe not being able to care for the family, but mostly through the fact of being depressed in itself. Depression is still often interpreted as being weak or powerless, something far from more dominant views on masculinity. Emslie et al. (2006) shows how some men approach these issues by trying to recreate a masculine identity where being strong and in power are included. Although this strategy actually could relieve depression, it also seems to lead to these men committing suicide to a greater extent than men using other strategies. Men that do not try to reconstruct their masculinity but instead try to reformulate it towards an inclusion of feelings such as weakness, powerlessness, or maybe even marginalization commit suicide less often. Strategies whereby an adjustment to dominating masculine ideals take place seem to be more harmful than ones where other ideals are being included into masculinity (Emslie, Ridge, Ziebland and Hunt 2006). By the same logic, it is possible to understand why suicide among men is higher in organizations based on certain masculine ideals, such as in the US military (Braswell and Kushner 2012).

What this shows is that if social work is going to be able to help men and boys, and help others victimized by men and boys, it cannot be through a practice whereby certain masculine
ideals are reproduced. A social work where being a man, without considering masculinity, in itself is a risk and thus a reason for treatment—which, moreover, is a gendered treatment customized to fit men—is a social work that unreflectively risks to reproduce specific masculine ideals. It is a social work where men and boys are being attributed a specific masculine ideology, rather than taking specific individual positions, negotiations, ambivalence, resistance, and movement between discourses of masculinity and gender (Emslie et al. 2006; Mac An Ghaill and Haywood 2012). Here lies the challenge for social work, to increase the knowledge about the relationship between masculinity and different kinds of social problems without, at the same time, presuming that all men and boys relate to masculine ideals the same way.

Hans-Herbert Kögler (2007) suggests that social workers need to change their approach to discourses from assuming their relevance to instead discussing the client’s approaches and relationships to them. Let us use fatherhood as an example. Instead of assuming the father is the breadwinner and an absent father, because this might be considered common or an ideal among many fathers, different discourses on fatherhood need to be approached together with the client. What is important is not whether or not the client could be positioned within a certain discourse, but, rather, how he relates to these discourses. What is important, what strategies are used, how is resistance done, and what other notions of fatherhood exist? This approach where people are active towards discourses rather than being determined by them does not lock someone in a presupposed version of masculinity—it creates a space for change.

Conclusion
To summarize, being a boy or a man is not in itself a risk. Being influenced by or feeling trapped by certain dominating notions of masculinity is. There is a difference. Being a risk does not permit any change since the being in itself is made the problem, and we cannot un-be and still remain alive. Being affected by certain ideals permits us to change the ideals and our relation to them and, finally, to creating new ones that do not risk harm to yourself or others, instead of adapting or feeling pressured to adapt.

In terms of masculinity and marginalization, an approach to masculinity or to “being” a man as something static and unchangeable produces challenges for men to be considered or feeling vulnerable or marginalized since this is not consistent with what a man “is”. A hegemonic view on masculinity often conforms to men being in power, having success, or being in control. This view, as suggested by Cheng (1999), tends to contribute to some men having power not only over women but also over other (more marginalized) men as well. The approach in which social workers, on the one hand, tend to interpret masculinity as a static risk factor and, on the other hand, seem to consider the same masculine ideals as being part of the solution does not open up for any changes. As a result, it could be argued that instead of decreasing marginalization, the interventions might even be involved in reinforcing marginalization.

First, it is possible to claim that men and boys could become trapped in a marginalized position because of their gender. This is possible if all that is needed for becoming a client or a patient is being gendered as male. Thus, masculinity could be argued to actually put men into a marginalized position of being subjected to the different regulations and positions enclosed by the social-services system. Second, however, this static approach to gender and social issues could be used, somewhat paradoxically, to conceal marginalization. When gender becomes more or less synonymous with certain needs or social situations, the men’s or boy’s own experiences, needs, and social rights risks being marginalized.
Therefore, social work needs to apply a more nuanced, attentive, and fluid view to masculinity and gender to be able to pay attention to both different ways of doing, interpreting, and relating to masculinity and to the different outcomes and effects these approaches to masculinity might have. It has to be possible to both be or feel marginalized and at the same time be empowered, or even in power, in other contexts, without the one position overriding the other (e.g. Cheng 1999).
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