Hegemonic masculinity and suicide: A review of the literature

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There is a gender paradox within suicide statistics: suicide rates are almost universally much higher in males, while rates of suicidal ideation and attempted suicide are much higher in females (Canetto & Sakinofsky, 1998). While men tend to use more fatal methods than women (Schrijvers, Bollen, & Sabbe, 2012), this does not adequately explain the difference (Cibis et al., 2012; Mergl et al., 2015), and still begs the question of why methods differ between genders.

The idea of "hegemonic masculinity" emerged as an alternative to sex role theories which divided gender into two homogenous and complementary or oppositional kinds, omitting inequalities of power between and within these categories (Connell, 1987). A social constructionist structure of power was proposed with multiple masculinities, one of which is hegemonic over subordinated masculinities as well as women. Within each context, the hegemonic masculinity is the normative masculine ideal to which men are most commonly expected to strive. Through this hegemony men gain and retain power and domination over women and other men. All men thus gain a "patriarchal dividend" even if they do not conform to the hegemonic masculinity (Connell, 1995).

Hegemonic masculinity is generally considered to have a deleterious effect on men's health in those contexts studied, contributing to men's underutilisation of services (Jeffries & Grogan, 2012; O'Brien, Hunt, & Hart, 2005); excessive drinking (Dempster, 2011; Joseph, 2012; Peralta, 2007); and poor diet (Gough, 2007; Nath, 2011). However, there is evidence that in some contexts hegemonic masculine ideals can have positive effects on men's health by encouraging healthy behaviours (Sloan, Gough, & Conner, 2010). This narrative overview of the literature aims to assess how the idea of hegemonic masculinity has been used to understand suicide.

Methods

Medline, EMBASE, CINAHL, Pubmed and PsycInfo databases were searched using the following terms on 20/01/2016:

1. hegemonic masculin*
2. dominant masculin*
3. subordinate masculin*
4. subordinated masculin*
5. marginalised masculin*
6. marginalized masculin*
7. 1 or 2 or 3 or 4 or 5 or 6
8. suicid*

English language, peer-reviewed articles were included with no restriction on date. 11 articles were identified. Two were excluded which did not use hegemonic masculinity to study suicide. References from identified articles were reviewed for relevant articles. One was identified. Thus ten articles were subject to review. These are summarised in table 1.

Results

Hegemonic Masculine Traits

A similar masculinity was identified in all articles as being hegemonic; one characterised by competitiveness and honour, independence,

Table 1

Summary of identified articles

Year	Country	Population	Summary	Reference
2008	Australia	Rural "farm men"	In-depth interviews with members of rural farming communities looking at mental health outcomes for men in the context of protracted drought. The paper argues that a rural hegemonic masculinity has been beneficial to the men in good times but is harmful in times of stress.	(Alston & Kent, 2008)
2008	UK	Men with depression	A review of literature demonstrating different approaches to men with depression. The paper discusses theories of sex differences, gender roles and hegemonic masculinity in this context.	(Branney & White, 2008)
2011	USA	Current and former military servicemen	A discussion of dominant masculinity norms among current and former servicemen in the US military. Based on available literature as well as composite, fictionalised case studies from the authors' experience. The paper argues that adherence to dominant masculine norms put servicemen at exceptional risk of suicide.	(Burns & Mahalik, 2011)
2012	Ireland	Young men (18-30) who had made suicide attempt	In-depth interviews with young men who had made an attempt at suicide. The paper argues that hegemonic masculinity norms increased men's risk of suicide by discouraging disclosure of emotional vulnerability and encouraging the use of alcohol and drugs to cope.	(Cleary, 2012)
				(continued)

strength and stoicism. Social change in communities was identified as a perceived threat to men's hegemony and "honour"; e.g. when women take on a breadwinner role (Alston & Kent, 2008; Oliffe & Han, 2014). Work and an ability to provide were thus identified as key to a masculine sense of honour, with a clear association between unemployment and male suicide rates (Oliffe & Han, 2014; Scourfield, 2005) and financial instability dominating motivation for domestic murder-suicides (Oliffe et al., 2015). One article compared male and female suicides (Niehaus, 2012) in a South African village, similarly finding that male suicides were perceived as a means of escape from situations where masculine hegemony was insecure. However, female suicides were also seen as protest at their subordinated position, thus implicating male hegemony in both male and female suicides.

In mass shootings involving suicide, honour was seen as a key determinant, with a "warrior-supportive" hegemonic masculinity in the US encouraging men to perform masculine acts of extreme violence to avenge perceived slights against their masculinity (Kalish & Kimmel, 2010; Oliffe et al., 2015). The perceived control over others or the need to establish control over others was also seen as a key motivator for homicide-suicides (Oliffe et al., 2015) and potentially in suicides used to punish others, e.g. following relationship breakdown (Scourfield, 2005).

Independence, strength and stoicism were thought to restrain men from seeking help and encourage acceptance of worsening circumstances (Alston & Kent, 2008). Depression was frequently perceived as a feminine trait. Men believed they should be less expressive of emotion than women; that men with depression are seen as weak; and that women expected and needed strong masculinities (Cleary, 2012). Thus they could not use discussion as an outlet for distress, instead seeking methods such

Table 1 (continued)
Summary of identified articles

Year	Country	Population	Summary	Reference
2006	UK	Men with depression	In-depth interviews with men with depression, exploring associations between men's gender identities and their depression. The paper discusses ways in which men adopted hegemonic or alternative masculinities in their recovery from depression. They also observed the contribution to suicidal behaviour made by pressures to conform to hegemonic masculinity.	(Emslie, Ridge, Ziebland, & Hunt, 2006)
2010	USA	Mass murderer suicides	An examination of three cases of mass school shootings in the US which ended with suicide of the shooter. The paper argues that these cases elucidate a culture of hegemonic masculinity which creates a sense of "aggrieved entitlement" which can lead to violence.	(Kalish & Kimmel, 2010)
2012	South Africa	Male and female suicides	Analysis of ethnographic narratives of male and female suicides in a village in South Africa. The paper argues that male suicides are normally preceded by thwarting of attempts towards dominant masculine status; while female suicides represent a protest at their subordinate position, both to men and other higher ranking women.	(Niehaus, 2012)
2014	Canada	All men	A discussion of men's work-related depression and suicide, specifically in the context of gendered analysis. Based on previous literature, the paper discusses how masculinities, including hegemonic masculinity, are connected with work-related depression and suicide.	(Oliffe & Han, 2014)
2015	Canada/ USA	Murderer suicides	Analysis of newspaper articles describing North American murder-suicide cases. The paper argues that marginalised masculinities and alignment to hegemonic masculinity emerged as key themes in these incidents.	(Oliffe et al., 2015)
2005	UK	Male suicides	A critical review of the suicidology literature. Analysis is performed using concepts of hegemonic masculinity and subordinated masculinities.	(Scourfield, 2005)

as alcohol, drugs or suicide (Cleary, 2012). Subjects in recovery from depression sought independence by reducing dependence on medication and healthcare, deriding any emphasis on interpersonal dependence in the recovery process (Emslie et al., 2006).

A lack of emotional competence was also identified in two articles, with rational objectivity seen as superior to emotion. Men who had attempted suicide were found to have little experience in expressing or exploring their emotions

(Cleary, 2012). This could cause tensions with others and a restricted ability to cope when new emotions were encountered. Furthermore, by establishing emotional distance from others, the feelings of these others (such as children) could be discounted in consideration of whether to take one's own life (Scourfield, 2005).

Some who attempted suicide found motivation by persuading themselves of the courage required to act or mocking themselves for the cowardice of

inaction (Emslie et al., 2006). The US military was identified as having a "masculine warrior" hegemonic masculinity which rewards strength, stoicism and independence, and punishes deviation. Servicemen displaying these attributes were considered competent while those lacking were thought to jeopardise others' safety. Extreme independence was encouraged with a sense of invincibility and a disavowal of weakness and vulnerability, reducing utilisation of mental health services among servicemen (Burns & Mahalik, 2011).

Positive Aspects of Hegemonic Masculinity

A minority of articles also identified positive effects of hegemonic masculinity. Responsibility to others was seen as a key barrier to suicidal behaviour, helping men to contemplate ways in which they may be needed by loved ones (Emslie et al., 2006; Oliffe & Han, 2014). However, this could become a motivator to suicide if men felt their families would be better off without them (Emslie et al., 2006). Subjects recovering from depression were found to reconstruct their masculinities according to hegemonic norms, finding strength in male company. They highlighted the importance in re-establishing independence, e.g. through medication. Others framed their recovery in hegemonic masculine terms, e.g. as battle. However, it should be noted that such subjects were a minority (Emslie et al., 2006).

Within the US military, Burns and Mahalik posit that emphasising self-reliance may help some servicemen retain some control over mental illness and encourage deliberate acts to overcome depressive symptoms. They argue that physicians can reduce feelings of shame by highlighting such possibilities which do not discard hegemonic masculinity (Burns & Mahalik, 2011).

Subordinate or Marginalised Masculinities

Subordinated or marginalised masculinities were rarely discussed, with only two articles explicitly addressing the concepts. Emslie et al. found a minority of those recovering from depression emphasised their differences with hegemonic masculinity, constructing a separate masculinity. They emphasised that depressed men may have more intelligence or sensitivity than others. Two ethnic minority gay men identified depression as just another difference and took pride in their differences; their distance from hegemonic masculinity helped them to construct a separate masculinity (Emslie et al., 2006).

Scourfield further suggests a subordinate mentally ill masculinity, suggesting that by aspiring to masculine rationality we identify the "irrational" as mentally ill (Scourfield, 2005). Branney and White also propose that differing behaviours in men with depression may be seen as the performance of a depressed masculinity; that aggression, substance misuse and suicide are ways of "doing depression" (Branney & White, 2008).

Homosexual masculinities were also discussed very briefly. The marginalisation of homosexual masculinities is established at a young age through homophobic insults (Emslie et al., 2006), and coming out as gay was a key factor in two suicide attempts (Cleary, 2012) reflecting higher suicide rates for homosexual men (Scourfield, 2005).

Discussion

Connell's concept of hegemonic masculinity hinges on the idea of multiple masculinities defined not only by their content but by power relationships between them. Most articles identified here mention these concepts, but go on to examine masculinity as a single form, albeit renamed hegemonic masculinity. As with sex role theory, variations from this normative masculinity are seen as deviant, with alternative masculinities rarely considered. Masculinity is thus a homogenous, oppositional counterpart to femininity rather than a relational

hierarchy of competing masculinities. Only two articles explicitly discussed subordinated or marginalised masculinities and this is very brief, leaving little recognition of intersectionality. There is, for instance, no discussion about different constructions of masculinity in different socioeconomic contexts despite the known relationship between deprivation and suicide rates (McLean, Maxwell, Platt, Harris, & Jepson, 2008). There is also no discussion of the power relationships between masculinities. Without this discussion, theories of multiple masculinities risk being reduced to a mere typology.

Another drawback in the literature is the small range of contexts within which hegemonic masculinity and suicide has been studied. While the greater proportion of suicides occur in low- and middle-income countries (World Health Organization, 2014), most research has taken place in high-income countries. This may explain why hegemonic masculinities were found to be similar in all the identified articles.

Future research in this area should focus on the power relationships within and between genders and the importance of subordinated or marginalised masculinities. Before such research is undertaken, the implications of theories of multiple masculinities for policy makers and mental health workers are unclear. The current literature may be useful in providing a deeper understanding of some hegemonic masculine traits within Western contexts and how these traits are performed in the context of suicidal ideation and behaviour. However, without greater understanding of alternative masculinities, the degree to which such traits can be subverted, resisted, co-opted or adapted will remain unclear.

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