

Men, sexuality and crisis pregnancy: A study of men's experiences

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RESEARCH

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The views expressed in this report are those of the authors and do not necessarily reflect the views or policies of the sponsors.

Foreword

I am delighted to welcome this important qualitative study that will increase our understanding of men, sexuality and crisis pregnancy. This study has sought to explore, the varied meanings and values that men attach to sexual health and sexuality and how they perceive their own role in crisis pregnancy. The Crisis Pregnancy Agency commissioned a number of qualitative studies to complement national survey data on men and women living in Ireland. This is one such study.

This type of data is very useful for the Agency and those working in the area of men's health and education/sexual health promotion. The findings enhance our understanding of previous research which shows for example, that boys are far less likely to have received quality sex and relationships education at home or in school. While the authors' point that learning about the biological aspects of sex is important, a focus is also needed on relationships, contraception, responsibility, self-esteem and decision making skills.

The findings and recommendations of this report will be useful in developing education materials and communication messages for men.

An important message in the report is the need for close cooperation with our colleagues working in the fields of preventing sexually transmitted infections (STIs). For men, who do not use any form of contraception and who have many sexual partners, it is critically important to ensure they are aware of the sexual health risks they are taking. These men need to be adequately supported in meeting their sexual health needs.

The study also resonates with previous work that highlights the need for crisis pregnancy services to be sensitive to the needs of partners. The Agency has initiated some new projects that hope to make crisis pregnancy counselling services more relevant and accessible to partners of women experiencing crisis pregnancy.

It is important to ensure that men, and especially young men, are not neglected in efforts to improve reproductive health. As an Agency we place an emphasis on targeting research, sexual health initiatives and services at women and men. The prevention of unplanned pregnancy, STIs, use of contraception and other reproductive health concerns are the responsibility of both sexes.

The Agency welcomes the report and wishes to acknowledge the unique contribution Harry Ferguson and Fergus Hogan have made to our understanding of an area that has hitherto, received little research attention in the Irish context.

Katharine Bulbulia, *Chair, Crisis Pregnancy Agency*

TABLE OF CONTENTS

Executive summary	7
1.0 Researching men, sexuality and crisis pregnancy	17
1.1 Background to and rationale for the research	17
1.2 Aims of the research	18
1.3 Key themes in the existing research and literature	18
1.3.1 <i>Men and sex education</i>	18
1.3.2 <i>Condom use/contraceptive practice</i>	19
1.3.3 <i>Men's role in decision-making around crisis pregnancy and having the baby</i>	20
1.3.4 <i>Men's experiences of crisis pregnancy and abortion</i>	20
1.4 Key theoretical concepts used in the study	22
1.4.1 <i>Procreative consciousness</i>	22
1.4.2 <i>Procreative responsibility</i>	23
1.4.3 <i>Turning points</i>	23
1.4.4 <i>Masculinities and sexualities</i>	24
1.5 Methodology	24
1.5.1 <i>Researching men: A qualitative approach</i>	24
1.5.2 <i>Recruiting men for the study</i>	25
1.5.3 <i>Challenges in interviewing men</i>	27
1.6 The characteristics of the sample	28
1.6.1 <i>Age distribution</i>	28
1.6.2 <i>Geographical location</i>	29
1.6.3 <i>Socio-economic status</i>	29
1.6.4 <i>Relationship type</i>	30
1.6.5 <i>Procreative experience</i>	30
1.6.6 <i>Pregnancy scares</i>	30
1.6.7 <i>Unplanned and crisis pregnancy</i>	31
1.6.8 <i>Abortion experience</i>	31
1.7 Limitations of the study	31
1.8 Structure of the report	32
2.0 From boys to men: What men know about sex and how they learn it	33
2.1 From traditional to post-traditional men: Changing discourses about sexuality	33
2.1.1 <i>Sex and post-traditional men</i>	35
2.2 Becoming aware of sex and learning about the facts of life	37
2.2.1 <i>Parental influences</i>	37
2.2.2 <i>Schools and (sex) education</i>	38
2.2.3 <i>The media and sexual health awareness campaigns</i>	39
2.2.4 <i>Piecing it together: The peer group</i>	40
2.3 Men's (lack of) knowledge of their own and women's bodies	40
2.4 Conquest masculinity and the gains of 'losing' your virginity	41
2.5 Constructions of masculinity and sexual practice	45
2.5.1 <i>Homophobia and the regulation of men's sexuality</i>	46
2.5.2 <i>Shy young men</i>	47

2.6	The importance of using direct and accurate language to describe sex	48
2.7	Conclusions and recommendations for policy and practice	49
3.0	The meanings and values that heterosexual Irish men attach to sex and sexuality: Men's sex lives and patterns of sexual practices	50
3.1	Men's sex lives and patterns of sexual practices	50
3.1.1	<i>Hedonistic pattern: Chronically irresponsible, narcissistic pleasure-seeking</i>	51
3.1.2	<i>Steady pattern: Shyness, decency and sex as a romantic, spiritual quest</i>	57
3.1.2.1	<i>Steadiness and the (re)negotiation of sex in long-term relationships</i>	60
3.1.3	<i>Impulsive pattern: Sexually active, generally responsible, but occasional risk-taking</i>	63
3.1.4	<i>Safe pattern: Sexually active no risk-takers who are always responsible</i>	63
3.2	Conclusions and recommendations for policy and practice	65
4.0	The meanings and values that heterosexual Irish men attach to sex and sexuality: Men's contraceptive practices	67
4.1	Men's attitudes to condoms and barriers to condom use	67
4.1.1	<i>Condoms interrupt sexual pleasure</i>	68
4.1.2	<i>Condoms can't be trusted</i>	69
4.1.3	<i>The influence of alcohol</i>	69
4.1.4	<i>Beyond condoms: withdrawal as a form of contraception</i>	70
4.1.5	<i>Beyond condoms: the morning-after pill as a form of contraception</i>	71
4.1.6	<i>Deferring responsibility for safe sex to the woman</i>	71
4.2	Learning from experience: Turning points in becoming responsible	72
4.2.1	<i>The man's sudden awareness of his capacity to impregnate a woman</i>	72
4.2.2	<i>Pregnancy scares as turning points</i>	73
4.2.3	<i>Learning from unplanned pregnancies</i>	74
4.3	Why men become procreatively responsible	75
4.3.1	<i>A fear of letting down the family and the self</i>	75
4.3.2	<i>A fear of being "trapped" by a woman who was an unscrupulous sexual predator</i>	75
4.3.3	<i>A fear of becoming a father much sooner than they wished, and the implications this would have for their career ambitions and the creation of a 'respectable' life</i>	76
4.4	Conclusions and implications for policy and practice	78
5.0	Managing a crisis pregnancy: Decisions where the pregnancy went to full term	79
5.1	A 'crisis'? The meanings of unplanned and crisis pregnancies for men	79
5.2	Managing an unplanned and crisis pregnancy: Decisions to have the baby	81

5.2.1	<i>On not going through with the abortion decision</i>	81
5.2.2	<i>Kept the child and stayed together</i>	82
5.2.3	<i>Kept the child and separated: Non-resident fathers</i>	84
5.2.4	<i>Co-parenting in a post-traditional order</i>	86
5.2.5	<i>Finding out after the event: Men excluded from decisions to have the child</i>	87
5.3	Crisis pregnancies as opportunity: Marginalised men, fatherhood and social inclusion	88
5.4	Conclusions and implications for policy and practice	91
6.0	Men's roles in decision-making about and experiences of abortion	92
6.1	Uncovering men's stories of abortion	92
6.2	Men's positive and negative experiences of abortion	93
6.3	"Not wanting to be stuck with a kid": Abortion as an opportunity to plan a good life	95
6.4	Men's vulnerability and therapeutic discourses on abortion	99
6.5	Negotiating decisions to have an abortion: Men's emotion management, silence and help-seeking patterns	104
6.6	What the research process suggests about men in crisis pregnancy situations	111
6.7	Conclusions and implications for policy and practice	112
7.0	Summary of recommendations	114
8.0	References	117

LIST OF TABLES

Table 1.1	Recruitment sources	26
Table 1.2	Age distribution	28
Table 1.3	Geographical location	29
Table 1.4	Relationship type at time of interview	30
Table 1.5	Procreative experience	30

Executive summary

Aims of the research

This research report was commissioned by the Crisis Pregnancy Agency with the overall aim of increasing understanding of men, sexuality and crisis pregnancy. While research has begun to increase understanding regarding crisis pregnancies in Ireland, men's perspectives have been almost completely absent from public debates, policy and service provision. The aims of the research, as determined by the Crisis Pregnancy Agency, were:

- to explore the meanings and values that Irish men of different ages attach to sex and sexuality
- to explore the self-perceived role of Irish men in crisis pregnancy
- to examine the discourses used by Irish men when discussing issues relating to sex and crisis pregnancy.

The sample

- 45 men were interviewed. Men were recruited who could talk about their heterosexual experience in general, and those who had crisis pregnancy experiences.
- 19 men had experienced crisis pregnancies, some more than one. These men and 26 others spoke about their sexuality and sexual experiences.
- Men were recruited through use of a leaflet distributed via work organisations, sports and community centres and faith groups, as well as through the media and word of mouth. The men were aged 18–57, from urban and rural locations. A variety of relationship types and pregnancy experiences were represented in the final sample of men. Only men who had been in a relationship in the past three years were included so that they would have relevant experience.

The research process

- Interviews covered the men's sexual histories, knowledge of sex and how they acquired it, contraception, sexual practices, and pregnancy experiences.
- Overall, the men were extremely open and frank about their intimate sexual experiences and sexuality. Most of the men settled quickly into talking intimately, and the interviews lasted between 90 and 160 minutes, depending on the man's eagerness to talk and the time he had available. Some clearly surprised even themselves in their capacity for openness. If the right conditions of safety are created and men are given permission to, some will talk about their most intimate experiences. This has implications for how relevant pregnancy and sexuality related services are designed and promoted. It was apparent that even in the research interviews some men sought to bolster their masculine identity with boasts about their sexual conquests. As far as possible, any men who showed an apparent macho façade were encouraged to go beyond it. For some, sexual conquest remained the dominant story of their sex lives, while many others had quite different stories to tell.

Limitations of the study

- The study only covers a sample of sexually active Irish men who are white and from the majority population. Some of the sub-groups within the sample are very small, such as men with abortion experiences, which means that the views and experiences

of a representative sample of all men and types of abortion situations could not be included. Generalisations about all men from such findings should be strenuously avoided.

- Women's voices are absent from the report, as the focus is on men's stories. Had women also been interviewed the findings throughout are likely to have shown differing views, as well as consensus, about people's attitudes, behaviour and decision-making in crisis pregnancies. Women's absence from this study in no sense should be taken to undermine the importance of their views, experiences or their position at the centre of crisis pregnancies.

FINDINGS

Overall patterns in heterosexual Irish men's sexual experiences

- Significant shifts are evident in sexual attitudes and practices over recent time. Men under 35 years of age demonstrated a growing liberalisation of sexual attitudes and behaviour. 39 of the 45 men interviewed reported having at least one 'pregnancy scare', where the woman's period was either late or missed and an unplanned pregnancy may have resulted. Given the size of the sample (45) and the fact that we sought out men who had experiences of crisis pregnancy (19), we cannot claim that this high number of pregnancy scares is representative of all Irish men. Notwithstanding this, the findings do indicate the presence of significant risk-taking in some Irish men's sexual lives.
- Men of all ages spoke of the lack of clear and open sex education available to prepare them when they were growing up, and even to some extent as adults. A striking finding of the research concerns men's general lack of procreative knowledge and the absolute poverty of efforts that are made to give boys and men good quality attention and information. Young men typically emerge into adulthood in Ireland without having received any constructive support or information about themselves as sexual and procreative beings. And this absence of information, mentoring support, and being challenged carries on through adult men's lives.
- The dominant message from school and home contained a moral that sex was meant to happen only within marriage. But the idea of waiting until marriage to have sex meant little or nothing to this sample of men, only 14 of whom were actually ever married. Given that most of the men became sexually active in their teens and outside of marriage, sex education did not in fact educate them at all as it completely failed to equip them to be sexually responsible *in the present* when sexually active.
- Heterosexuality is experienced as being compulsory for men. In general young men growing up feel under pressure to not only be heterosexual but to *prove* it. Many did this by adopting a 'conquest masculinity', often exaggerating or lying about their sexual conquests and/or becoming sexually active just to prove their heterosexual manhood. Homophobia and fears of violence from the peer group should they be perceived to be gay had a powerful impact on men, young and old. Many had experienced such violence.
- We also found some modest evidence of gentler, more supportive teenage and early adulthood peer groups among men who were sexually inactive and not that interested in sex in their teenage years. Even so, these men still felt the pressure of having to negotiate their way around the requirement to be seen to be actively heterosexual.

- The pressure to be sexually active led some young men to have sex before they were fully aware they were able to cause pregnancy. Some men only became aware of their capacity to make a woman pregnant when they had actual penetrative sex.
- Men had different interpretations of terms such as 'safe sex'; indeed, it was evident in the research process that language needs to be as behaviourally specific as possible in naming sexual and contraceptive practices, and the actual 'safe' practices that are required need to be spelled out. Terms such as 'safe-sex' should be avoided because they mean different things to different men.
- Men find it hard to talk about sex to their sexual partners and need help to find an authentic voice and articulate their needs and responsibilities.
- Some men don't change their sexual risk-taking, even following a pregnancy scare or unplanned pregnancy. Unless attempts are made to directly engage with boys and men about potential or real pregnancy scares and unplanned fatherhood, then the possibility for the scare to become a turning point in the man's life where he adopts a more disciplined contraceptive practice will be lost.
- The most consistent definition of responsible contraceptive behaviour to emerge from the men concerned condom use: Being a sexually responsible man involves always carrying and using a condom. Only a minority of men in the sample had lived up to this for the duration of their sexually active lives.
- Embarrassment at being seen to buy condoms was a significant factor in men's avoidance of ensuring they had the means to be responsible. Men generally preferred the anonymity conferred by using dispensing machines.
- A number of the men disliked condoms because they interfered with their sexual pleasure; in more extreme cases some men described having difficulty sustaining an erection after putting on a condom.
- A minority felt that condoms could not be trusted.
- The findings suggest that it is the norm for men to take sexual risks (hence the high level of pregnancy scares experienced by these men). Most men learn from experience, but at different speeds. Some, however, do not learn.
- While some men in crisis pregnancy situations are disinterested and provide little or no support to the woman in the crisis, some men play a role in negotiating how crisis pregnancies are managed.

Heterosexual Irish men's sexual practices and the meanings and values they attach to sex and contraception

Key differences were apparent in heterosexual men's sexual practices and in the level of responsibility they took for preventing pregnancies and for unplanned pregnancies once they happened. Four overall patterns were evident.

Men's sexual practices: hedonistic pattern

"You know the way girls go on anyway. They come back from the pub and they're locked, and you're locked yourself anyway. You don't give a shit if you're wearing a johnny or not because, well, you should, but back three or four years ago when you were in college, you didn't give a shit because, 'Oh, I'll shag this one' and that's it, kick her out of the bed later..."

That was your attitude in college: Lads, 'Oh what did you get last night?' or 'What was she like?', like, you know. But, to be honest with you, not being vain, now, but it's over two hundred [sexual partners/one night stands], seriously."

(22-year-old single professional and nightclub worker)

Men in the 'hedonistic pattern'

- are very sexually active and take no responsibility for preventing pregnancies
- are chronically irresponsible, narcissistic pleasure-seekers
- are misogynistic, showing little or no respect for women or regard for women's welfare
- are egocentric and do not learn from experience
- see their sexuality as testosterone driven, out of control
- tend to be in denial about any pregnancies they have caused, or when that does happen and they find out, they generally fail to change their irresponsible behaviour. Such irresponsibility extends to strategizing about how to avoid being found out by the woman should she become pregnant following a one-night stand. As one man put it, on going back to the woman's house "[you are] planning your escape before you get there," to avoid waking up beside them, or being 'caught'.

Sexual hedonism is partly a phase that some younger men go through but it is about much more than age. Two of the oldest men in the sample (aged 57 and 48) displayed this pattern. Sexual hedonism has its roots in a combination of the men's arrested moral development in childhood, patriarchal attitudes and the legacy of failures in sex education - never having received any quality information about responsible sexual practice, been mentored by anyone or even challenged about their behaviour.

A fifth of the men in the sample fitted the hedonistic pattern. Despite their statistical minority in this sample, such men present a key challenge to policy and practice regarding crisis pregnancy, sexual health and gender equality.

Men's sexual practices: steady pattern

"I think my sense of sexuality and all that would have been tied up less in piety but more in sort of a sense of decency. You know, that is in part associated with piety, but is not entirely the same thing. You know, decency could allow you to make love or have sex before you marry her, but, you know, you had to treat her right, kind of thing; you know that feeling."

(34-year-old married professional)

In the 'steady pattern':

- Men's sense of themselves as men and their sexuality is not tied into notions of uncontrollable sex drives, sexual conquest or performance. Having sex may or may not be important to them, but is only feasible and morally just under certain conditions.
- Some men are shy and hesitant, others more confident. They relate their sexuality to romanticism, spirituality, love and the well-being of their partner. They are essentially respectful to women; they negotiate sexual activity with their partners and behave responsibly should a crisis pregnancy occur. For instance, following a pregnancy scare that did not result in a pregnancy, the man quoted above and his partner stopped having sexual intercourse until they felt ready to conceive a child.
- When a crisis pregnancy does occur men in this pattern show significant empathy to the woman.
- In this pattern men are basically sexually responsible, take some risks but learn quickly from experience.

Men's sexual practices: impulsive pattern

"I would be a very placid person when I am sober. I would be very set in my ways; I would know what I want and I would know what I shouldn't do; I would be defined by the morals that I have, but when it comes to drinking, you just loosen up and things go wrong. Well, I wouldn't say that things go wrong but you do things that you normally wouldn't do and you would have sex where you wouldn't wear condoms where normally you would be 100% where you would wear condoms, you know. Or the situations would arise where you are there and you are ready and the condoms are over in a drawer and you are entangled ... but you don't use them."

(20 year old, who became an unplanned father at 18, during his final year at school)

In the impulsive pattern:

- Regular sex is important to the men, who are irregular risk-takers.
- Risk-taking and lack of contraceptive responsibility is situational. Men in this pattern are basically responsible and have good intentions, but take risks in certain situations. Typical situations that lead to risk taking include:
 - Not having a condom when the opportunity to have sex arises.
 - Being too drunk.
 - Intending to withdraw and failing to.
- A key pattern surrounds men keeping going and staying silent about contraception unless the woman says stop. This arises from the following factors, which occur either singularly or in combination:
 - Risk-taking in having unprotected sex with the (too often failed) intention of withdrawing prior to ejaculation.
 - A belief that contraception is the woman's responsibility.
 - Finding it difficult to talk about sex, negotiate and take responsibility.
 - The desire to have sex leads the man to avoid saying anything that might lead to the woman stopping it - an avoidance of the subject while doing it.

Men in the sample who had affairs are another example of how some men's sexual pathways do not always develop in a linear fashion. They take risks, both with relationships and with unwanted pregnancies.

Men's sexual practices: safe pattern

"Actually I've always used a condom, yeah. Always. Always... A lot of girls today seem this thing of, 'Well, it's okay because I'm on the pill', like. Fuck's sake! I mean, maybe I was a really careful kid. I don't know, maybe I was over cautious but, no -, in my eyes, no way man, no. I was always, I always wore a condom, yeah."

(29-year-old single, businessman)

From the perspective of developing policy aimed at preventing unplanned pregnancies, the ideal sexual pattern is a 'safe pattern'. Here sexual risks are never taken and the man is committed to never doing so.

This pattern is not, however, the norm, being practiced by six men in the sample. Yet even here three of these men experienced a pregnancy scare (but not a pregnancy) where contraception failed (the condom burst).

Thus, taking account of those men who were completely sexually irresponsible and those who were completely responsible, the majority of men in the study were generally responsible, taking occasional risks but also learning from pregnancy scares and other experiences.

Turning points in changing men's sexual and contraceptive practices

While some men stay fixed in the pattern of sexual practice they have adopted by early adulthood, men can move around these patterns in a variety of directions. Steady men become impulsive; some hedonistic men become more 'steady', and so on. The ideal trajectory so far as preventing crisis pregnancies is to move men as quickly as possible to the 'safe' pattern. The key 'turning points' identified in the research, which enable men to learn and develop responsible behaviour, are:

- Early experiences of unprotected sexual intercourse with ejaculation, inducing in the man a sudden awareness of his capacity to make a woman pregnant.
- Pregnancy scare(s) – that is a suspected pregnancy with a woman telling the man that her period was late.
- Learning from unplanned pregnancies.
- Responding to a fear of letting down family and themselves.
- A fear of being "trapped" by a woman.
- A fear of becoming a father much sooner than they wished, and the implications this would have for their career ambitions and the creation of a 'respectable' life.

The meaning of 'crisis' pregnancy for men

- Of the 45 men interviewed, 30 men had experienced unplanned pregnancies. Of these 30 men, 19 men had experienced 22 pregnancies that they defined as *crisis* pregnancies.

- Not all unplanned pregnancies become a crisis. Some unplanned pregnancies either immediately or very quickly became wanted pregnancies; for instance, when they occurred within long-term relationships or in short-term relationships where the pregnancy became wanted after an initial period of confusion, ambivalence and / or intense negotiation.
- For some marginal young men unplanned fatherhood was experienced as an *opportunity* to have a meaningful life and role, in the context of social exclusion through disappointments in education, employment and so on. For some middle class men unplanned pregnancies were experienced as a crisis because of the threat a child represented to the successful fulfillment of their professional education, career ambitions and life plans.
- For some men an unplanned and unwanted pregnancy was not experienced as a crisis because they didn't care about the outcome and left complete responsibility for decision-making up to the woman.
- For men who wished to take some responsibility, an unplanned and unwanted pregnancy was a crisis.

Outcomes of the crisis pregnancies

Of the 22 crisis pregnancies experienced by 19 men in the study:

- 10 of the crisis pregnancies were brought to full term
 - 6 births occurred to couples who chose to stay together
 - 4 births occurred where the couple decided not to live together or be lovers
- 8 men had 10 abortions (ie. 1 man experienced 2 abortions and another, 2 abortions and a miscarriage)
- 2 crisis pregnancies ended in a miscarriage.

Characteristics of decisions where the pregnancy went to full term

- The couple, no matter how short the relationship, shared some sense of a future together, or at least were prepared to face having the child and sharing parenthood - be it as a couple or apart.
- The man had some kind of vision of himself as a father.
- The man showed a willingness to have a flexible approach to creating a family, including being prepared to live apart from the prospective mother and commit to being a (possibly non-resident) father.
- The man was willing to state his wishes and feelings in relation to the pregnancy.
- The couple felt their own parents and extended families - even if sometimes dismayed by the crisis pregnancy - would support them as parents.
- The capacity of men and couples to adopt a flexible definition of 'family' and approach to parenting, which is not linked to marriage or even cohabitation, was crucial in some situations to how crisis pregnancies were resolved in a manner which led to a decision to have the baby.
- Some men who were relatively unknown to the women they made pregnant had to actively counter stereotypes of men to whom this happens as feckless, irresponsible and potentially useless fathers. While some men in the study did fit into this stereotype - and such irresponsibility should be highlighted and challenged - it is important that men's capacity to behave responsibly becomes part of public perceptions, as this can play a part in reassuring and supporting women in the decision-making process during a crisis pregnancy.

- Being responsible at the time of an unplanned pregnancy did not always involve trying to make the adult relationship work by planning to be a couple, but instead involved the man actively supporting the pregnancy and expressing an intention to be an involved father while living separately from the mother. A crucial factor in negotiations was men demonstrating a willingness to support the prospective mother and to be flexible in the type of 'post-traditional family' they were prepared to create, by committing to being non-resident but involved fathers.
- Not all men delivered on their intentions for involved fatherhood after the baby was born. It appears that they managed to convince the woman that they saw themselves as having a key role to play, albeit often a more limited one than the mother. Thus for some men the meaning of responsibility when negotiating a crisis pregnancy does not extend to equal responsibility for parenting. For some others, it does.
- The men viewed the support role of their extended families - and grandmothers in particular - as hugely necessary and positive in enabling them to become fathers and remain in contact with their children. However, we cannot assume that grandparents/mothers always want to play this role, or do so without being financially and emotionally burdened and/or ambivalent.

Men's experiences of abortion

- The length of time between the abortion experience and the research interview ranged from six months to 34 years.
- Six of the eight men with abortion experience were actively involved in the decision to have the abortion. Two of the men only knew *after* the event.
- The men's involvement in decision-making varied from men who felt consulted but essentially "blocked" out by a woman who had already decided to have the abortion, to those who felt intensely involved in negotiations with the woman.
- Men's attitudes to abortion prior to the crisis pregnancy - whether they were for or against it - had a limited impact on decision-making. The degree of love felt for the woman and pragmatic concerns, such as whether the man really wanted to be a father at that time, the costs to his career etc., were most influential in guiding decisions.
- All eight men expressed some emotion about the abortion experience, be it sadness, despair, anger, relief or a sense that it brought opportunity. Some felt these feelings more strongly than others. For all of them it was a highly significant experience in their lives and had impacted on their relationships, attitudes and behaviour. The most common pattern was for the impact to lessen as time passed.
- One man felt the abortion experience had ruined his life.
- Some men came to value the learning and opportunity to become focused in planning their lives the abortion gave them.
- Seven of the men with abortion experience regarded themselves as having lived quite full and satisfying lives in the sense of travelling, working outside of Ireland for periods, career development, excelling at sport, having (more) sex with different women, having fun and generally not being tied down.
- There was a stronger tendency for couples in abortion scenarios to keep the pregnancy secret.
- Most men in this sample did not access support services, or even know about them.

- One man who did visit a support service felt excluded, as he felt the workers there focused on the woman and ignored him. Relevant services tended to be perceived as women's services.
- The dominant pattern was for men to provide stoic support to the woman, they said, to help her deal with her distress and not to open up about their own wishes for the pregnancy or their feelings, even to her, never mind any one else. As well as wanting to keep quiet about it themselves, the men felt pressure from their partner to keep the secret and never talk about it. For some men the research interview was the first time they had spoken about their abortion experience to someone other than the woman who had been pregnant.
- While men felt this silence was supportive to the woman, what they did not emphasize was that it may also have relieved the men of full responsibility for shared decision-making.
- Nevertheless, the findings from this small sub-sample of men show that while the nature and intensity of men's involvement varies often men who care and wish to take some responsibility play a significant role in negotiating how crisis pregnancies are managed.
- Some men are irresponsible and leave the woman with total responsibility for the crisis pregnancy and its aftermath.

SOME KEY RECOMMENDATIONS

- Boys and men need quality sex education and information about:
 - sex, the male and female body and how pregnancy occurs
 - intimate relationships, responsibility, how to deal with their fears, uncertainties, vulnerabilities and the choices they have today to create flexible family forms, which may assist them in decision-making should a crisis pregnancy occur.
- Boys need to be educated about sex much earlier than is currently happening. Sex education programmes need to be fully developed in primary schools and their effectiveness evaluated.
- The operational definition of responsible sexual practice for men that needs to be adopted is an absolute 'no exceptions' rule in relation to condom use.
- Policy should be framed in a manner that underlines the importance of condom use beginning before actual sexual contact has been initiated. All boys and men must be given information and support to encourage them to adopt a safe pattern of sexual behaviour from the earliest age possible.
- Condoms should be made widely available, preferably from dispensing machines.
- The invisibility of men in public discourse about crisis pregnancy situations needs to change, to reflect the fact that some men play a key role in negotiating how crisis pregnancies are managed.
- While women's position at the centre of crisis pregnancies must be maintained, men need to be *named* as people for whom unplanned/unwanted pregnancies can also be a crisis.
- Services that respond to crisis pregnancies need to be promoted as open to and inclusive of men unless this is inappropriate.
- As well as addressing the needs of men (and women), services need to provide couple and family work to assist in the negotiations and planning that the research suggests need to happen around such things as: the definition of active fatherhood;

the possibilities for flexible organisation of the new 'family'; the role of grandparents and extended family in providing possible support should the pregnancy go full term; the implications of an abortion for the man as well as the woman.

- Support services need to be available to vulnerable men who view unplanned pregnancies as an opportunity, towards helping them develop a responsible fatherhood identity and practice.
- The key role that grandparents – especially grandmothers - perform in providing support to parents both during and after a crisis pregnancy needs to be recognised and supported - financially as well as socially – by the State and others.
- A pilot project is needed that provides counselling services that are strategically inclusive of men; the pilot project needs to be fully evaluated to establish its effectiveness, issues of best practice, and ways of engaging and holding on to men.
- We recommend a follow-up study, which will provide a systematic review of the international literature and projects providing men-centred services connected to prevention and sex education, and pre- and post-abortion counselling. A key focus should be on methodological issues in terms of 'what works' in engaging men, keeping them in services and helping them to develop their procreative responsibilities.
- We recommend that further research should be carried out into the hedonistic pattern of sexual practice, its formation and ways of moving men away from it into the safe pattern.
- A full-scale follow-up study dedicated solely to men's experiences of abortion is needed.

1.0 Researching men, sexuality and crisis pregnancy

1.1 Background to and rationale for the research

This research report was commissioned by the Crisis Pregnancy Agency with the overall aim of increasing understanding of men, sexuality and crisis pregnancy. While research has begun to increase understanding regarding crisis pregnancies in Ireland (Dempsey, Heslin and Bradley 2001, Mahon, Conlon and Dillon 1998), and of women's fertility and sexuality more generally (Murphy-Lawless, Oak and Brady 2004), men's perspectives have been almost completely absent from public debates, policy and service provision. Men's lives as procreative beings, their personal experiences of sex and (crisis) pregnancy have been the subject of little research in Ireland, and very little internationally (Marsiglio 1998).

What research has begun to show is that, in general, gender relations and Irish men's lives have changed significantly over the past 20 years, with a trend toward greater self-reflection among men about their roles and relationships (Clare 2000, Cleary 2005, Ferguson 2001, Ferguson and Hogan 2004). This has gone hand in hand with quite dramatic changes in sexual relationships and the nature of family life. Traditionally, that is to say prior to the 1970s and 80s, Irish men's lives and masculinity were broadly defined in terms of two cultural role models: the god-fearing good provider father and the Catholic priest. In many respects, under the powerful influence of Catholic social teaching, celibacy defined men's sexuality and cultural norms. Sex was not only meant to be confined to within marriage but was for procreation, while the absence of available contraception typically led to large families. This is not to say that men (or women) never had sexual pleasure but when this did occur it was a subversive act within a dominant ideology that demanded chastity and 'decency' (Ferguson 2001).

Today, however, the use of contraceptives among 'married' couples in the Republic of Ireland is similar to that in other European countries. Family size has declined to under half of what it was just 25 years ago. One-third of all first births are now outside of marriage, a potent indicator, indeed, of how the traditional link between marriage and parenthood is being broken. The dramatic increase in married women entering the workforce over the past two decades has been such that just half of all families in Ireland with dependent children have a single male breadwinner, placing new demands on men to negotiate and share childcare with women (McKeown, Ferguson and Rooney 1998). Consequently, women's lives are generally regarded as much more open compared to just a generation ago (Inglis 2003, O'Connor 1998). While men's lives are inherently bound up with such changes, and at an anecdotal level significant changes appear to be occurring, little actual empirical research has been done to explore the nature of Irish men's lives today.

Ireland is a society in transition, at the heart of which is the erosion of what Inglis refers to as the Catholic Church's 'moral monopoly' and the ending of the silence and feelings of shame and guilt about anything to do with sex (Inglis 1998a, 2003). Prior to the 1980s and 90s:

Learning about sexuality was confined to learning about what was right and wrong, good and bad, appropriate and inappropriate sexual behaviour... There was little or no attempt to provide a knowledge and understanding about sexuality.

(Inglis 1998b: p9)

This report documents evidence with regard to how a sample of men in Ireland are negotiating such changes. It makes men visible as procreative beings, in the hope that men's roles and perspectives can be taken account of in debates and policy formation concerning crisis pregnancies, sex and making babies - or not making them.

1.2 Aims of the research

The aims of the research, as defined within the research brief of the Crisis Pregnancy Agency (CPA), were three-fold:

- To explore the meanings and values which Irish men of different ages attach to sex and sexuality.
- To explore the self-perceived role of Irish men in crisis pregnancy.
- To examine the discourses used by Irish men when discussing issues relating to sex and crisis pregnancy.

The focus here is not on the totality of forms of men's sexuality but on men who have sex with women and have experience relevant to the issue of (crisis) pregnancy.

We translated these aims into a number of research questions, which we explore in the study:

- When and how do boys and men become aware of themselves as sexual beings and learn about sex and sexuality?
- How do heterosexual men understand their sexuality, how do they practise it and what are their feelings about how they express it?
- What are men's attitudes to contraception and what responsibility do they take for it?
- What role do men play in decision-making about how to manage an unplanned pregnancy?
- What are men's experiences of unplanned pregnancies going full-term, and of abortions?

1.3 Key themes in the existing research and literature

Although a relatively neglected area of research, men, sex and crisis pregnancy has not been completely ignored. A review of the existing literature reveals four main themes in the relevant research: men and sex education, condom use/contraceptive practice, men's role in decision-making around crisis pregnancy and having the baby, and men's experiences of abortion.

1.3.1 Men and sex education

Sex education and services seeking to promote positive adolescent sexual health and prevent teenage pregnancy have developed in Ireland in recent years, but remain significantly under-developed (Hyde and Howlett 2004, Maycock and Byrne 2004). The latter studies and Fullerton's (2004) review of these developments identify a particular gap in service provision and knowledge concerning what works with young men.

Tom Inglis (1998b), in his book *Lessons in Irish Sexuality*, examines the socio-political context and history of sex education in Ireland. Central to his thesis is the assertion that - until the recent erosion of the Catholic Church's monopoly over morality - sex education

was all about teaching children and adults the “rules and regulations of the Catholic Church” (Inglis 1998b: p9). The message that men and women were taught about sex was quite simply that heterosexual marriage was the only place where sex could take place and its “sole purpose was procreation, rather than pleasure” (Ferguson 2001: p120).

Carlson (1991) identifies a shift in discussions of sexuality from a traditionalist discourse, which portrays sex primarily in terms of sin and sickness, through progressive and libertarian discourses, which emphasise sexual pleasure, diversity and individual sexual rights, towards a radical Freudian discourse, which stresses the importance of creating non-repressive sexuality in a post-patriarchal society. Such a shift in discourses on sexuality creates the opportunity for sex education to include reflection on the nature of self identity and development of the self:

Understanding sex, love, passion and desire is central to understanding who and what we are – our emotions, anxieties, fears, pleasures and tastes. Talking about them openly and honestly in private and public life, is an important process of discovering who we are, and how we came to be the way we are. Teaching young people about sex, sexuality and personal relationships is seen as central to becoming critically reflective, individually moral responsible adults.

(Inglis 1998b:p8)

Some recent international projects have focused on targeting what they call “teaching moments” with boys and young men, where opportunities to engage in critical reflection are capitalised upon and where places for men to go to talk about and get support around sex, relationships and crisis pregnancies are formally created (Armstrong 2003).

1.3.2 Condom use/contraceptive practice

A recent Irish study *Women and Crisis Pregnancy* (Mahon, Conlon and Dillon 1998) highlighted that for many women stigma still surrounds being seen to buy, carry and present condoms for use. The study also indicated contextual factors that made condom use less likely to be carefully practised, including being carried away in the heat of the moment, having drunk too much alcohol and only using condoms if it was an unsafe time in the cycle.

Some international studies on men's attitudes and behaviour in regard to condom use indicate that the nature of the relationship affects the men's contraceptive consciousness and behaviour. Reisen and Poppen (1995) found that men and women used condoms less frequently as relationships evolved and trust increased and they came to use other types of contraception more consistently. Laundry and Camelo's (1994) study of young adults, men and women between the ages of 16 and 29 years, revealed that condom use was more common in short-term, casual relationships but that talking about contraception was less likely to occur within such relationships. Meanwhile, Barker (1998) found that talking about sex and contraception generally occurred in committed relationships.

1.3.3 *Men's role in decision-making around crisis pregnancy and having the baby*

Men's role in decision-making about crisis pregnancies that resulted in decisions to keep the baby is a neglected area (Marsiglio 1998). One interesting study 'Fathering in the Inner City' (Furstenberg 1995) focused on the barriers and opportunities that young marginalised men faced in relation to what the researchers term "involved fathering". The study found that while most young men (and women) seemed to want to have sex they were unprepared for the consequences and very often expressed surprise when an unplanned pregnancy occurred. Very high levels of ambiguity were evident as to whether or not all unplanned pregnancies were experienced as a crisis. Maternal grandmothers were found to play a central role in influencing their daughter's decision about the pregnancy and later acted as gatekeepers to the fathers' level of access and involvement with the baby. These findings are supported by other American research (Marsiglio and Hutchinson 2002). A study of men involved in decisions to have babies adopted, *Birth Fathers and their Adoption Experiences* (Clapton 2003), found that the greater the involvement of birth fathers in the decision-making process - whether they agreed with the plan to place the child for adoption or not - the more likely they were to experience positive feelings towards the adoption and the less likely they were to experience on-going negative feelings of "powerlessness and distress."

1.3.4 *Men's experiences of crisis pregnancy and abortion*

Once again, men's involvement in decisions about abortions is a neglected area of study. As William Marsiglio points out in his ground-breaking study of what is known about men and reproduction, 'Little is known about how men express their procreative consciousness in connection with the general process of resolving a pregnancy or with respect to abortion in particular. Research has seldom explored men's emotional reactions and coping styles in this area' (Marsiglio 1998: p91). As Marsiglio goes on to comment, this gap in understanding is unfortunate because it not only has implications for men in how their perspectives and needs are not taken into account, but for women. Understanding men's involvement in the crisis pregnancy/abortion decision-making process is important because some research suggests that how men expect to cope with the pregnancy affects women's decision-making about how to resolve a crisis pregnancy, especially among women who have low expectations about their ability to cope with the pregnancy and a baby (Major, Cozzarelli, and Testa 1992).

Studies of the emotional and psychological consequences of abortion for women have demonstrated what a complex area of inquiry this is. For instance, many stressors have been found in the lives of women, and the impact of an abortion is shaped by the presence or absence of a range of other stressors, meaning there is no single answer to the question of how abortion will affect women (Russo 2001). Thus, the abortion does not occur in a vacuum, but its impact is greatly influenced, for example, by the general psychological health of the woman before and around the time she became pregnant. A real difficulty for researchers concerns being able to attribute the precise impact of the abortion and separating this as a causative factor from other experiences that may have contributed to emotional distress and trauma over the woman's life (Posavac and Miller 1990, Arthur 1997, Major 2003). Studies of women's experiences also suggest that positive and negative emotions can be experienced at the same time. Positive emotions include relief and happiness, whereas some women experience guilt, grief, depression, anxiety, and self-blame as an aftermath of abortion (Adler, David, Major, Roth, Russo and

Wyatt 1992). Some researchers suggest that few women experience significant or enduring psychological distress as a result of the abortion (Boyle 2002). Distress may be associated with such things as having a previous psychiatric history and not feeling supported in the decision to have the abortion, or feeling that others made the decision. On the basis of its review of the literature, the Psychological Society of Ireland (1992) suggests that a small percentage of women report severe negative responses to terminating an unwanted pregnancy. Significant factors in this include where a pregnancy that was originally wanted was terminated, where the woman felt coerced to have the abortion, and/or there was a history of emotional disturbance before the abortion.

While a neglected area of research on men, this literature on women's experience sensitised us to the need to explore the men's experience of crisis pregnancy and the impact of abortion in the context of their life experience. It also focused our research, underlining that what we were seeking to do was understand how these events were given meaning by the men, rather than trying to measure psychological impact in some more clinical sense. Moreover, we were alerted through this literature to the fact that the abortion outcome may be more positive when compared to the consequences of an unwanted pregnancy, so one cannot simply assume that abortion is a (more) problematic experience. But we also needed to be open to the possibility that, like women, men can have negative emotional responses to a partner's abortion, which, for some, may even be severe.

The lack of relevant literature is exacerbated by how some of what is written on men and abortion is limited by a lack of rigour from a social science perspective. As an internet search on men and abortion will quickly demonstrate, there is a form of writing that takes a clear position on the rights and wrongs of abortion as it is heavily informed by a theological or ideological position – the most common appearing to be evangelical Christianity. The point is not whether one agrees or disagrees with such ideologies and faith systems, but that because they are based on opinion as opposed to well designed scientific approaches, they are of no value to a study such as this.

By far the most extensive and rigorous sociological study on men in this area is Shostak, McLouth's and Seng's *Men and Abortion: Lessons, Losses, and Love* (1984). The researchers surveyed 1,000 men who accompanied their partners to 30 abortion clinics across the USA, and conducted detailed interviews with 75 of these 'waiting room men'. At the time of the study in the early 1980s, as many as 600,000 males annually in the United States, 'from downy-cheeked teens to gray-haired fathers – 'do time' in the waiting rooms of the nation's 500 or so abortion clinics' (Shostak et al. 1984: p2). 60% of the 1,000 men surveyed were single, 18% married, 12% living together and 10% formerly married men. 87% of the married men were accompanying their wives. The relationships between the men and women, even for the singles, were relatively stable – 22% of the single men were engaged and 57% were dating their partner on a steady basis. Thus, the researchers observed, 'it was not surprising that waiting room males show genuine concern about the well-being of their lover, fiancée, or wife, many interrupting clinic staffers with anxious questions about the woman at every opportunity' (Shostak et al. 1984: p3).

In fact, a significant overall finding was just how emotionally involved most of these men were in the abortion process and how deeply it affected them. The abortion experience

left some men feeling a deep sense of loss and emotional pain. The authors conclude that their findings challenge deeply held assumptions about (and public images of) men as largely uninvolved and uninterested in the abortion process. Yet their findings cannot be taken to be the full story. As the authors are aware, their sample of 1,000 men did not include men who did *not* attend clinics with their partners and is biased in that it only covered men who were present with the woman and whose presence tended to reflect their care for her. Significantly perhaps, their attempts to recruit men with abortion experience who did not accompany their partners through media appeals and requests for cooperation placed in men's movement newsletters yielded just 18 participants, a tiny number in a country the size of the USA. This illustrates how difficult it can be to recruit men for such research, especially those who may be embittered and have feelings and values other than the more positive caring virtues these researchers suggest were common in the men who accompanied their partners on the abortion journey. Thus it is crucial to bear in mind which men are being heard to speak and which are not and the implications of silences (Marsiglio 1998: p92).

Of other relevant studies, one found that most teenage men want to be included in the decision-making process around possible abortions and are interested in receiving emotional and social support at this time (Redmond 1985). A more recent Swedish study of young men aged 15 to 26 found that the nature and quality of the men's relationship with the woman influenced the decision-making process (Holmberg and Wahlberg 2000). An Irish study of teenage pregnancy, which sought to include expectant younger mothers and fathers, supports these findings, all be it based on a tiny sample of just two men (Dempsey, Heslin and Bradley 2001). The men felt excluded from consideration about the pregnancy and as future fathers by both health and social care professionals and family, neighbours and friends, as attention was focused almost exclusively on the woman/mother. The general neglect of men in efforts to improve sexual health and responsibility for contraception and (unplanned) pregnancy is a dominant theme throughout the literature (Yamey 1999, Ndong 1999). Issues relating to sex and pregnancy are then perceived as 'women's issues', thus reinforcing the danger that men will neither take nor be given greater responsibility.

1.4 Key theoretical concepts used in the study

The study was also guided by some key 'sensitising concepts' drawn from the relevant literature.

1.4.1 *Procreative consciousness*

At the core of a concern with men, sex and crisis pregnancy are issues to do with procreativity. This refers to the capacity of men to impregnate women and become the biological fathers of children. We have drawn the concept of 'procreative consciousness', and that of 'procreative responsibility', which we discuss below, from the conceptual framework developed in the work of William Marsiglio, the leading American academic and researcher of men's procreative lives (Marsiglio 1998, Marsiglio, Hutchinson and Cohan 2001). The concept of 'procreative consciousness'.

Captures men's ideas, perceptions, feelings, and impressions of themselves as they pertain to various aspects of procreation. In some instances, men may not be fully cognizant of their emotions in this area. Nonetheless, men's experiential sensations may affect their outlook and actions. Furthermore, I use the concept to highlight how men's experiences in the procreative realm relate to their romantic partner, father and gender role identities. Men's views about their procreative potential and their actual paternity are essential in this respect.

(Marsiglio 1998: p16)

Focusing our interviews around the concept of procreative consciousness (without directly using such terminology, but translating into everyday talk and issues) allowed for an exploration of men's awareness of their potential to make women pregnant, how they arrive or fail to arrive at this awareness, how this awareness is maintained, and the relationship of their consciousness to their behaviour.

1.4.2 Procreative responsibility

The concept of 'procreative responsibility' refers to how men choose to behave around sex, contraception, discussions about the risk of pregnancy, sexually transmitted infections, conceptions, births and abortions (Marsiglio and Hutchinson 2002). Marsiglio defines the concept as referring to

Men's beliefs about their obligations as well as their involvement in areas related to contraception and conception, processes around ART [assisted reproductive techniques], discussions about how a pregnancy should be resolved, child bearing and, to some extent, paternal activities. Thus this concept not only emphasises men's views about their options for acting "responsibly" in the context of different events related to procreation, it includes their actions in this area as well. The procreative responsibility concept deserves special attention because it has important implications for social policy. (Marsiglio 1998: pp23-4)

Procreative responsibility is particularly important to explorations of men's self perceived roles in preventing unplanned pregnancies and how such crises are managed when they do occur.

1.4.3 Turning points

The interviews for this study traced with the men the development of their sexuality and sexual practices. We were concerned to identify significant 'turning points' (Strauss 1969) in the men's lives that both formed and reformed the men's practices. We followed Marsiglio and Hutchinson's (2002) use of the concept of 'turning points' in their study of young men, sex and pregnancy. Turning points in relation to sexual activity extend into the most minute yet possibly consequential intimate acts, such as the decision about whether or not to get out of bed and get a condom out of the cupboard, or not to withdraw before ejaculation once unprotected penetration has occurred. Turning points refer to moments of significant magnitude to affect men's sense of themselves as procreative beings. Turning points alter men's previous attitudes to contraception, pregnancy and

procreative behaviour; for example, a pregnancy scare, an unplanned pregnancy or an abortion might cause a man to become more aware of his responsibility for contraception. Understanding turning points in men's procreative lives is crucial to developing understandings of what influences men to make particular kinds of decisions about their sexual practices, including at the time of unplanned pregnancies.

1.4.4 Masculinities and sexualities

The past twenty years or so have witnessed a huge development in the study of men and masculinity in the social sciences and in popular media debate about the 'battle of the sexes' and the so-called 'crisis of masculinity'. Traditionally, while men were everywhere to be seen and dominant, the categories of 'men' and 'masculinity' were taken for granted as natural. The essential aim of the new sociology of men and masculinities is to consider men as *men*, and the nature of men's lives and relationships. In the early days of masculinity studies the tendency was to regard all men as essentially the same ("all men have power"), and not to consider differences between men. Today, however, the emphasis is much more on diversity in men's and women's, boys' and girls' lives - in gendered identities in the plural. The focus is now on 'masculinities' (Connell 1995), which are now seen as being created not only through power and other relations between men and women, but through relations between groups of men. Thus, while there are many different ways of being a man, these are given different value in society. Gayness is positioned at the bottom of the hierarchy of what a 'real' man is supposed to be, while heterosexuality is taken as the norm. Underpinning men's lives is a dominant view of manhood, which prescribes certain norms of male behaviour that all men have to grapple with, even in the course of defying or negotiating those norms.

The relevance of this appreciation of the multiple ways of being a man to this study is that it provided a means to drawing out how heterosexual men's experiences of sex and (crisis) pregnancy are influenced by their relations with other men, as well as women. It allows for the complexity of men's sexuality to become apparent: There is no single male sexuality, or even a single heterosexuality, but many forms of 'sexualities' (Weeks, Holland and Waites 2002, Plummer 2004). Effective research into men's sexuality must do justice to this complexity, and we identify four patterns of sexual practices and ways of performing masculinities that were evident in the lives of the 45 men interviewed in the study (see, especially, Chapter 3).

1.5 Methodology

1.5.1 Researching men: A qualitative approach

The research questions and aims of the study required a methodology that could generate extensive data about the experiences of men in relation to sexuality and crisis pregnancy. It was necessary to have detailed first-person narratives of men's experiences of sex, sexuality, pregnancy scares and crisis pregnancies. Qualitative research seeks to generate knowledge which is based on people's own accounts of their lived experience and how they express and give meaning to everyday life. It focuses on individuals' perspectives as located within broader socially constructed frames of reference. We therefore adopted a qualitative methodology that drew on the experiences of a strategically designed sample of 45 Irish men.

The research design was particularly influenced by the somewhat comparable American work of Marsiglio and Hutchinson (2002): *Men, Sex and Babies*. They interviewed a sample of younger men only about 'procreative consciousness,' 'procreative responsibility' and fatherhood. We worked to a semi-structured interview schedule, which covered four main areas:

- Becoming aware (including, growing up and into sexuality, learning the facts of life).
- Being aware (including, first sexual experience, values and attitudes to contraception, how/if acquired knowledge that he could father a child, risk-taking behaviour).
- Being responsible (including, perception of self as a sexual person, sexual practices, condom use and contraceptive behaviour, capacities for openness in discussing sex with partners and what, if anything, the man does to prevent unwanted pregnancies and protect sexual health).
- Pregnancy experiences (1. re men and unplanned pregnancy which led to fatherhood; 2. re men and unplanned pregnancy which led to an abortion).

Through this approach, the interview schedule followed a developmental path with men which explored how –or indeed if – they acquired procreative consciousness and what level it was at, and how – or indeed if – they practised procreative responsibility.

The interviews with the 45 men were held at a place and time of the interviewee's choosing – be it their homes, offices, or quiet public places such as cafes or parks. When required, we also hired rooms in hotels to conduct the interviews. The interviews lasted between 90 and 160 minutes, depending on the flow, the man's eagerness to talk and the time he had available. We were very careful not simply to set up the interviews in an ethically correct way but to practice 'process consent', where we reminded the men as the interview went on of their rights to refuse to answer questions should they not wish to. All the men gave permission for the interviews to be tape-recorded and all were transcribed to facilitate analysis. Summary notes and process reflections were prepared for each participant immediately following the interview, and subsequently cross-case interpretative analysis was conducted, comparing and contrasting common themes and patterns in the men's narratives. This involved the repeated reading of transcripts to make sense of their individual content and to establish both similarities and differences in attitudes and experiences.

1.5.2 Recruiting men for the study

To facilitate recruitment of men we designed a leaflet explaining the research and inviting participation, which (with permission) was left in GP surgeries, maternity services, community and family centres and so on. Our first draft read: "Men wanted to talk about Sex!" which was an attempt to reach men through irony, given the stereotype that 'all men talk about is sex (and football)!' However, in piloting the flyer the feedback suggested that people didn't really appreciate the irony and were scared off by our bluntness. So without concealing the sex and crisis pregnancy agendas, we adopted a more gentle approach, which focused on our interest in talking to men about their relationships with women and attitudes to pregnancy.

Following discussions with the CPA, the priority of the study was to interview 'ordinary Irish men' in the sense of needing to capture the attitudes and experiences of men from the

majority of the population and dominant culture. Thus we did not seek to include men from different ethnic backgrounds, which is important research work that remains to be done.

To maximise participant diversity we used a combination of purposive and theoretical sampling strategies. Since our primary focus was on men’s experiences of sex in general and also on particular kinds of experience (crisis pregnancy), we did not choose a random sampling technique, but rather accessed men through selective site sampling, snowballing and word of mouth. We contacted a number of selective sites across a wide geographical spread, including pregnancy support agencies, health services, drop-in centres, sports clubs, and through employment types, such as banks for middle-class men and factories for working-class men (see Table 1.1).

A small number of men were recruited through snowballing. For instance, one man who had an abortion experience contacted us for an interview having heard about the research from a friend.

Table 1.1 Recruitment sources

Source	Number
Community & youth centres	5
Sports clubs & recreational facilities	6
College chaplains & parish priest	2
Banks & computer industries	7
Health Board employees	3
Factories	4
Word of mouth & information leaflet	11
Media campaign	7
Total	N = 45

We found our greatest success in recruiting men came where key contact people who proved sympathetic to the research passed the flyer directly to men. It was not the commissioning agency’s or our intention to interview only men who had experiences of crisis pregnancy. At the outset we were happy to settle for around 10 of the men in the study to have had direct experience of a crisis pregnancy. The number was set at this modest level in recognition of the challenges involved in getting men to come forward about such a sensitive topic. In the event, we ended up recruiting 30 men with experience of unplanned pregnancy, 19 of whom defined them as a ‘crisis pregnancy’. These 19 men experienced 22 crisis pregnancies, as some had more than one. This sub-sample of 19 men and 22 crisis pregnancies provides the basis for exploration of men’s self-perceived role in crisis pregnancy and analysis of the discourses used by Irish men when discussing issues relating to sex and crisis pregnancy. We considered seeking out men who were *currently* experiencing a crisis pregnancy but ultimately decided to focus on recruiting men who had experienced such a crisis in the past and had come through it. We hoped that such a distinction would help the research in that the men had at least some time/space to reflect on the factors that influenced how they managed the crisis. The remaining 26 men were interviewed about sexuality and

procreative issues in general (the majority, for instance, had experienced pregnancy scares that had not resulted in conception), issues that were explored with the crisis pregnancy men also, meaning that the entire sample has been used to produce data on men, sex and (hetero)sexuality in general.

In the initial period of the study we interviewed 38 men, including three men who had abortion experiences. In order to increase the number of men with experience of crisis pregnancy situations, we targeted men with abortion experiences through a media campaign: via local and national newspapers and radio and television; advertisements in church publications and national parent support group's newsletters. We successfully interviewed seven more men, five of whom had abortion experiences to recount, bringing to eight the number of men in the sample who had direct abortion experience. The other two men interviewed in this phase had planned abortions but their partners did not go through with them. One had already become a father at the time of interview, the other was about to be.

1.5.3 Challenges in interviewing men

While no kind of qualitative research is ever easy, some researchers argue that interviewing men, especially about sensitive, personal subjects, presents particular challenges, and specific strategies for interviewing men are required. Schwalbe and Wolkomir (2002) emphasise that good interviewing techniques in themselves are not enough when the central focus of the interview is men and gender. Interviewers need to be alert to men's need to "signify, in culturally prescribed ways, a creditable masculine self, a self portrayed by control, authority, rationality, risk taking and sexual desirability" (Schwalbe and Wolkomir 2002). The loss of control that surrendering oneself to the vulnerability of a research interview concerning such sensitive topics creates real challenges in how men need to be facilitated by the interviewer(s) to feel safe and expressive during the interview. Having grappled with these issues in our previous work (Ferguson and Hogan 2004), we again found in this study that the research interview itself can become a domain where (multiple) ways of being a man are performed, constructed, revised and negotiated. We, as male interviewers, were ethically challenged to be curious about our own preconceived ideas and prejudices concerning men and sex.

For instance, the very first man we interviewed claimed to have sexual intercourse four times a night. It seemed appropriate for us to adopt a healthy scepticism toward men about some of the claims they made regarding how often they had sex and their sexual practices. We made the men aware of our doubts by being open about what is widely suspected about how men can engage in "macho" boasting and in ethically appropriate ways challenged them to be 'real' with us. This is not the same as saying that men lied, but in recognition of the fact that some men seemed to find it hard to move beyond stories of sexual conquest, a 'conquest masculinity', and needing to present themselves as highly sexually active. Thus, readers should know that we did not always accept men's stories at face value and do not present them here as entirely unproblematic. That said, overall, we feel that the men have been extremely open and frank with us about their sexual experiences and sexuality. Some clearly surprised even themselves in their capacity for openness as they commented on this. We are satisfied that the interviews produced authentic accounts of a range of male experiences of sex, and a range of problems – as well as pleasures – when experiencing it and its consequences, such as pregnancy.

1.6 The characteristics of the sample

We sought to include men with diverse experiences in terms of background (rural/urban), social class (accommodation type, education, and employment status), relationship type (one-night stand, long term commitment, married, separated etc), and procreative experience (novice, pregnancy scare, unplanned pregnancy, new/old father). Given the likelihood that men change the way they understand and express their sexuality as they grow older, we interviewed men across a wide age spectrum. We targeted three geographical areas but also recruited men from outside these areas who responded to our information leaflet and media campaign.

Following Marsiglio and Hutchinson (2002), we imposed one further criterion for inclusion in the study: that the men must have dated at least one woman in the last three years, ensuring that the interviewees had relevant heterosexual experience and recent memories of it.

As well as the 45 interviews described above, two other interviews were carried out. These were 'deviant' cases, in that the men involved had not been in a relationship with a woman in the previous three years. However, the interviews were not ended, out of respect to the men, who had voluntarily come forward having heard about the study. The two men, both in their late 30s, had never been in a relationship with a woman – they said due to shyness, not knowing how to go about entering into a relationship, and also poverty, not having the money to invite a woman out on a date. While not included in our overall sample/analysis these men provide immediate evidence of the different types of experiences men have in Ireland today.

1.6.1 Age distribution

Age range	Number
18–20	3
21–30	21
31–40	15
41–50	3
51 and over	3
Total	45

All of the men in the sample were over the age of 18 at the time of interview, although three men were younger than 18 when the pregnancy was conceived. We did not set an upper age limit, in keeping with the research brief to include "men of all ages". Clearly, the sample is biased in favour of men in their 20s and 30s. This is partly because this is when men are at their most sexually and procreatively active. Men in their 20s and 30s are therefore a priority group, about whom as much as possible needs to be learned. In addition, as the research progressed we found that a clear distinction in men's experience does not simply appear to be according to chronological age, but a distinction between 'traditional' and 'post-traditional' lives. By 'post-traditional' we mean a shift to a situation where men (and women) have more choice about how they practise their

sexuality today. The availability of contraception, for instance, has radically altered men's approaches to sex, even if many do not (always) take responsibility for preventing pregnancies. Men make different choices about how to negotiate their new sexual 'freedoms' - as we will document throughout this report - perhaps the most distinctive being the separation of sex and parenthood from marriage, which, for many of our interviewees, appears to have lost much of the power it had in the 'traditional' order to set moral standards and structure people's behaviour (Giddens 1994).

The data suggests that the key change in men's discourses and experiences around sex and sexuality occurred in the 1980s, with an age threshold of early 30s as being the key marker of 'traditional' and 'post-traditional' men. In other words, the narratives of men aged under 35 generally have a quality that is different and essentially much more sexually 'knowing' and active than men aged over 35. Viewed in this way, the sample is, in fact, well balanced between traditional and post-traditional men's experiences. We reasoned that in a study with limited time and resources there was not a great deal to be gained from interviewing more men who are older than men in their mid to late thirties, although we do not deny the inherent sociological interest in older men's experience and have fully incorporated analysis of their narratives throughout this report.

1.6.2 Geographical location

Geographical background	Number
Urban (town / city)	29
Rural (village / countryside)	16
Total	45

Twenty-nine of the men were currently resident in town or city locations - some of whom grew up in the country - while 16 lived in 'rural' areas (see Table 1.3). Two men (one in his twenties and the other in his forties) had grown up in England before returning to live in Ireland and considered themselves 'Irish'.

1.6.3 Socio-economic status

Adopting standard sociological categories, 16 of the men can be categorised as working class. These included unskilled and semi-skilled labourers, factory workers, and men in service industries, in the day- and night-time economy. Five of these 16 men were unemployed at the time of the interview and two of these men defined themselves as 'whole-time unemployed.' Two men, one whose family was middle class, the other semi-skilled, dropped out of college due to the crisis of an unplanned pregnancy. The remaining 29 men can be categorised as middle-class, and included representatives from such professions as journalism, nursing, medicine, academia and teaching, the law and business¹.

1 We have changed all names of the interviewees in this study. However, in order to fully respect confidentiality and interviewee's anonymity, we feel unable to provide any more precise detail about participants in the study. Throughout, the report is, however, very clear about the broad identities of which men are being quoted and the implications of sociological factors such as socio-economic status.

1.6.4 Relationship type

Of the 45 men, all had been in some form of a relationship with a woman in the previous three years. Table 1.4 outlines the types of relationships the men said they were in at the time of the interview.

Relationship type	Number
Single	14
Short-term relationship	4
Long-term relationship	2
Cohabiting	10
Married	14
Divorced	1
Total	45

There is something of a bias towards men in long-term relationships/marriages, but it should be remembered that we gathered important data from these men about their sexual/relationship histories and experiences of being single.

1.6.5 Procreative experience

The 45 men represented a wide range of sexual and pregnancy experiences and (non-) contraceptive practice (see Table 1.5).

Procreative experience	Number of men
Pregnancy scare	39
Unplanned pregnancy	30
Crisis pregnancy	19*
Births from crisis pregnancies	10
Miscarriage	2
Abortion	8**
Affair	3
Sexually transmitted infection	2

* Nineteen men had experienced 22 crisis pregnancies between them.
 ** Eight men experienced 10 abortions - two men had two abortions each.

1.6.6 Pregnancy scares

A ‘pregnancy scare’ refers to a situation where the woman’s period was either late or missed and an unplanned pregnancy may have resulted. In tracking the men’s entire sexual histories (as opposed to just the current relationship), only six men said they had never had a ‘pregnancy scare’. In fact, the number of actual scares for women was probably higher, in that three of the six men who claimed not to have had a pregnancy scare were extremely sexually active and might have made many women pregnant without ever knowing the outcome of their active sex life. Three men, all within the

younger age range, professionally aspiring and educated, reported that they were faithful condom users, hence they had not to date experienced any pregnancy scares. All of the other men (39) disclosed having had at least one pregnancy scare, and some had many, with a number finding out that it was a false alarm.

Given the size of the sample (45) and the fact that we sought out men who had experiences of crisis pregnancy (19), we cannot claim that this high number of pregnancy scares is representative of all Irish men. Notwithstanding this, the findings do indicate the presence of significant risk-taking in some Irish men's (sexual) lives.

1.6.7 Unplanned and crisis pregnancies

Thirty of the men reported experiences of unplanned pregnancy. Significantly, not all unplanned pregnancies were defined by the men as a crisis; eleven of the men said the unplanned pregnancy either immediately was or very quickly became a welcomed pregnancy and a wanted baby. Nineteen of the men experienced 22 crisis pregnancies between them. One of these men experienced three crisis pregnancies with two different women and the partner of another man had two crisis pregnancies. The men described the unplanned pregnancy as a "crisis", where for a prolonged time the couple did not know what to do about it or where to turn. This resulted in different decisions and outcomes; thus, within this sub-group of 19 men who had 22 crisis pregnancies, 10 conceptions were brought to full term and 10 ended in abortion. In two other instances the crisis pregnancy ended in miscarriage.

1.6.8 Abortion experience

Eight of the 19 men who experienced crisis pregnancies were involved in actual abortions. Two of these men had experienced two abortions, which accounts for the ten abortions covered in the study overall. In most cases (six out of the eight men) the abortion happened with the man's knowledge and some kind of involvement in the decision to terminate the pregnancy.

1.7 Limitations of the study

While the sample includes a broad profile of men who had a wide range of experiences it is not in the strict scientific sense a representative sample. We cannot claim to show, for example, that nearly every Irish man has had a pregnancy scare. Such generalisations are invalid because we did not study a representative sample of men, which would have needed to be statistically much larger than that covered here. The sample is biased in that it is skewed towards men who have had crisis pregnancy experiences, which is a product of who we set out to recruit. That said, because we did manage to recruit men without crisis pregnancy experience for discussion of sexuality in general we are able to comment more generally on men's heterosexuality and sexual practices. Viewed in this way, the study reveals a high level of men who have had at least one pregnancy scare, which raises questions about the lack of preparation and on-going mentoring boys and men get to equip them to practise procreative responsibility.

Women's voices are absent from the report, as the focus is on men's stories. We are aware throughout this report that had women also been interviewed the findings are likely to have shown differing views (as well as consensus) about people's attitudes,

behaviour and decision-making in crisis pregnancies. Their absence from this study in no sense should be taken to undermine the importance of women's views, experiences or their position at the centre of crisis pregnancies. The same needs to be said about the discussions in this report of women's sexuality in general. Because women's voices are absent from the report, what is offered is men's accounts of their experiences of women and their views on women's (hetero)sexuality. Many claims are made by men about how women are sexually, and we have - as far as possible - subjected these comments to rigorous analysis. But, because these remarks involve other people and an entire gender not included in the interviews we cannot in any way claim to have represented what women's sexual experience, attitudes and behaviours actually are, something which has been explored in other research (Mahon, Conlon and Dillon 1998, Murphy-Lawless, Oaks and Brady 2004). The justification and aim in focusing only on the male voice is to deepen understandings of heterosexual men's experiences, needs and their role in crisis pregnancies. In privileging men's personal stories this study has uncovered a collection of rich narratives of how heterosexual Irish men relate to themselves and others as sexual beings. We hope that this report does justice to the complexity of the men's lives and can contribute to deepening understandings of men's needs - and those of women and children too - and the development of effective policies and practices in response to them.

1.8 Structure of the report

The report is divided into seven chapters. Chapter 2 explores how (or indeed if) boys and men acquire knowledge of sex and responsible sexual practices. It is based on men's narratives of how and where they learned about the facts of life, lost their virginity and first experiences of contraceptive practice. The policy and practice implications for sex education, in particular, are drawn out.

Chapter 3 explores the meanings and values which Irish men of different ages attach to sex and sexuality by examining in detail the sex lives of adult men. The chapter identifies a number of key pathways that men take in the expression of their (hetero)sexuality and considers the implications of these patterns for policy and practice in preventing crisis pregnancies.

Chapter 4 moves on to examine in detail men's contraceptive practices. It focuses in particular on condom use, but also considers the full range of contraception available. It explores the key processes and turning points that make a difference in whether men adopt a 'safe' pattern of sexual practice and become sexually and procreatively responsible.

Chapters 5 and 6 explore the self-perceived role of Irish men in crisis pregnancy and examine the discourses used by Irish men when discussing issues relating to sex and crisis pregnancy. Chapter 5 focuses in depth on crisis pregnancies that resulted in decisions where the pregnancy went to full term. Chapter 6, meanwhile, covers similar themes in relation to decisions to have an abortion. It explores the discourses used by Irish men when discussing issues relating to sex and abortion, the self-perceived roles of men in such decision-making and men's experiences of such crises and the outcomes of decisions to have an abortion.

Chapter 7 concludes the report with a summary of the key findings and recommendations.

2.0 From boys to men: What men know about sex and how they learn it

A key area of exploration in establishing men's relationship to and practices of sex and sexuality is their level of knowledge of sex and reproduction and how they gained it. Considerable media attention has been given to concerns about teenage sexuality, and there has been much polarised public debate in relation to the development of school-based sex education programmes (see Inglis 1998b). However, there is very little understanding about the processes by which young men become conscious of their potential to procreate, and then incorporate that knowledge into their developing sense of self. That is, how boys and men first begin to learn and develop a procreative consciousness. This chapter explores men's narratives of when, where and how they learned about the facts of life, and how – or if – they became conscious of themselves as persons capable of impregnating a partner. We uncover the various messages men have been given by their parents, teachers and peer group in relation to the meaning of sex. We show how they first became sexually aware and experienced themselves as sexual beings, including stories about how they lost their virginity and their first experiences of managing contraceptive practices as sexually developing men in a changing Ireland. The policy and practice implications for sex education, in particular, are drawn out.

2.1 From traditional to post-traditional men: Changing discourses about sexuality

We shall begin by profiling the broad context within which men lead sexual lives today and the kind of lives they lead. While this touches on the core themes of the entire report, it is important to provide such an outline of the changes that the data suggests have occurred in Irish society and men's experience so that it becomes possible to fully ground the analysis of what men know about sex and how they learn it in the realities of their experiences. In other words, with respect to sex education, for instance, we need to set the scene by asking 'Education for what?' and 'What are the kinds of norms and lifestyles, the starting-points, from which policy and practice must seek to intervene?'

In general, the interviews showed a significant shift in the sexual attitudes of Irish society over recent time, away from a traditional morality heavily influenced by Catholic social teaching, where sex was only understood as being part of marriage for the purpose of procreation. Given that just 14 of 45 men in our sample had ever actually married, there is clear evidence that a marriage certificate has lost its traditional meaning, at least, in legitimating sexual activity. Generally speaking, men who were below their mid to late thirties demonstrated a growing liberalisation of behaviour and attitudes towards sex before marriage. These changing attitudes and behaviour reflect what has been called the emergence of a 'post-traditional' order (Giddens 1994). Some 'post-traditional' men in this study spoke in terms of a separation of sex from a long-term committed relationship, in some cases regarding sex as part of a recreational lifestyle separate from any sense of relationship.

Men's narratives of relationships, intimacy and the place of sex in traditional Ireland suggest that sex before marriage was unspeakable and hidden. As a result, men in general struggled to enjoy sex, given the spectre of fear that was associated with it.

Growing up as teenagers in the 1960s, 1970s and even as recently as the 1980s - during times when condoms were unavailable - fear itself was a great contraceptive.

There was always that fear of pregnancy, you know ... that fear was huge ... there was no way at twenty that a) I wanted to have a baby, to be honest, b) that I was going to go home and tell my parents they were going to be grandparents. And I think it was the same for her [girlfriend], I really believe it was the same for her: that fear, that fear was the greatest contraceptive ever.

(39 years, married father of four)

Living with the fear of an unplanned pregnancy outside marriage created a context within relationships where men generally had to be happy with emotional closeness and some physical contact rather than full penetrative sex. For those that did succumb to their desires, it appears that the lack of available contraceptives created a context where men had to learn more about women's bodies though practising methods of natural family planning. In general, men who grew up prior to the 1980s practising the 'rhythm method' demonstrated more confidence about understanding women's menstrual cycle, of safe times for sex and using the withdrawal method as a negotiated form of family planning. The wide availability of condoms and other forms of birth control today has ironically added to a context of risk of unplanned pregnancy by releasing men from the responsibility of having to acquire knowledge of women's bodies.

The broad cultural context was one where sexuality and talk about sex - in schools and families - was repressed. For many of the men struggles with their parents' generation continued into adulthood. As one participant put it about his experience as a twenty-something in the 1990s:

In my own house when I came home for the weekend if you saw a kiss on television you'd have the father switching the channels.

(34-year-old married father of two)

For his father "it was dirty to talk about condoms," and if he saw them referred to on TV he'd "have a huge big tirade of abuse about people, you know, he'd do this and he'd tie them up to Nelson's Pillar and lash them."

Yet while this traditionalist discourse on sex was the dominant experience of the over-35's in the sample, other patterns were evident. A small number of over-35 men fitted into a more liberal form of sexual practice, despite and even because of sexual repression, embodying a libertarian discourse which emphasises sexual pleasure, diversity and individual sexual rights. This is exemplified by Walter, a 41-year-old interviewee, who fondly remembered having sex for the first time as a young teenager in the countryside.

And then it was, this girl after her, [name], and I'm sure that [name] had lost her virginity ahead of me, but she took my virginity, like, and that was great fun; thoroughly enjoyed that, and we'd be at it wherever we could, like, so that was it, like...

[And when you say she took your virginity, was that a loss?]

I suppose I haven't looked back since. It wasn't a loss, no - like hell it was! Nice, I mean, I was looking forward to it; I couldn't wait to get my end away; it was fabulous; it had to happen; it was a pleasure; it was delightful.

(41-year-old separated father)

Describing himself as a "fearless lover", this man claimed to have rarely used condoms and exemplified the pattern where some men showed no level of procreative responsibility at all. This shows how within general patterns of gendered identities, men from different age groups and backgrounds construct their male identities in multiple ways, and how these constructions of masculinity have a direct influence on the meanings different men give to sex and how they practise it.

2.1.1 Sex and post-traditional men

For the men who grew up since the 1970s there has been an increased openness to the practice of sex. As we discuss in detail in Chapter 3, we found considerable diversity in the men's sexual practices, in terms of their levels of interest in sex, its frequency and the responsibility for preventing pregnancies and sexual ill-health they took. A striking overall feature of the younger men's narratives is the choice they feel they have to actively practise their sexuality today. The availability of contraception has radically altered men's approaches to sex, even if many do not (always) take responsibility for preventing pregnancies. Contraceptive practice was influenced by men's embarrassment at buying condoms, concerns about the cost and quality of condoms, the influence of excessive drink and - much less often - drugs, and some men's deferring of contraceptive responsibility to the woman.

Men, as this report will show throughout, make different choices about how to negotiate their new sexual 'freedoms' and a number of patterns to men's identity formation and behaviours were found to exist. This ranged from men for whom sex was practised infrequently and was only important as part of a loving relationship, to those for whom sex was understood as a biological imperative and a recreational pursuit. For the latter men sex is part of their lifestyle, of a night out. In some crucial respects, the overall scale of the change in men's (sex) lives and the challenges involved in preventing unplanned and crisis pregnancies is exemplified by the most sexually active men in the sample.

One such man, 28 at the time of interview, spoke passionately of his twin loves in life: sport and sex, and for him both were purely recreational, while his relationship with his daughter (with whom he did not live) was what he lived for.

If I don't have good sex with somebody well then I'll end up not having sex with them, because I'd rather have good sex and enjoy it than going through the motions, so ... Yeah, I regard it as an integral part of a relationship. I really enjoy having sex. I would have quite a high sexual urge out of the [sports] season, not as much during the [sports] season because I train four nights a week and I play games at the weekends, so I find energy-wise that I just wouldn't have as much energy as I normally would. But out of the [sports] season I would have quite a high sex drive. At the same time I can go without it for six or seven months and I have done and it has never bothered me and I don't get frustrated, I masturbate regularly and all that sort of thing.

(28-year-old separated / shared parenting father)

His work in the night-time economy brought him into contact with what he described as a regular supply of eager women, many of whom he claimed he often slept with in a context of regular, casual sex among consenting friends. 'Girlfriends' of his would phone an hour or so after he finished work to see if he was free - for sex as well as a place to sleep - a casual arrangement that he was quite open to, if he wasn't too tired after work. He described himself as a willing accomplice to these women's sexual pursuits rather than him being necessarily opportunistic or predatory. Neither he nor the women apparently saw a problem with his having sex with nearly all of them.

Yeah, well it is because I think I, because I explained it to them why if they ever ask, you know, because a lot of the girls would always make jokes at me. I have slept with four girls out of a similar group and there's two other girls who are part of that group who I haven't slept with. I'd regard all six of them as good friends and some of the conversations that the two girls who haven't, I haven't slept with, come back and tell me, and just say were you thinking about [sport] last night when you were with her and they're saying what are you on about, like, how do you know about this, and it's because the girls were talking amongst themselves. So I think that they're okay about it and they seem to be able to have a laugh about it and I've always regarded that as okay.

(28-year-old separated / shared parenting father)

On this man's account, this group of women had no real concern that he didn't practise safe sex; if they had a condom and wanted him to use it he would, but he didn't care enough to practise safe sex himself. He explained the genesis of this cavalier approach to contraceptive use as having come about from the unplanned pregnancy of his (now ex-) girlfriend. They had been using condoms and she still got pregnant, so condoms "don't work" - hence his philosophical approach that if a child is meant to come along then they will come along regardless of precautions taken.

This kind of narrative should not be taken as representative of all the men in this study. As we shall show, despite increased choice and sexual freedom, some men still choose not to be very sexually active. What these very sexually active men do epitomise is a number of trends in post-traditional relationships and men's sexual lives:

- The separation of sex from marriage and parenting from committed adult relationships.
- The development of new discourses about responsible involved fathering, irrespective of whether the man is a resident or non-resident father.
- The creation by some couples of 'post-traditional families', where they adopted a flexible approach to defining a 'family' as one response to crisis pregnancy situations, with men being prepared to live apart from the prospective mother and commit during the pregnancy to being a non-resident father.

Among the key implications of this is that preventative work and sexual and relationship education could focus on informing young people about the choices they have today to create family forms and styles of parenting which can both enable them to be fully responsible for preventing unwanted pregnancies, and which may assist them in decision-making should a crisis pregnancy occur. All of these points will be discussed at greater length in what follows.

2.2 Becoming aware of sex and learning about the facts of life

Having shown some of the broad changes in the context and norms around sex and the ways in which Irish men practise sex today, it is now possible to examine the degree to which boys and men are educated and prepared to meet the challenges of sex within post-traditional Ireland. A striking finding of the research concerns men's general lack of procreative knowledge and the absolute poverty of efforts that are made to give boys and men good quality attention and information. The majority of the men interviewed spoke vividly about how they had to learn what they knew about sex and 'the facts of life' from their peer group, older men and in some cases from pornography or romance fiction, television, or even watching animals in the countryside. Information about sex came from four sources: their parents and family; school teachers and sports coaches; the media and sexual health awareness campaigns; and the peer group. Overall, the quality and quantity of information received was woefully inadequate.

2.2.1 Parental influences

I can honestly say I never found out anything in school about the facts of life; I never found out anything at home about the facts of life; I had to go out and find them myself, you know.

(34-year-old factory worker from a provincial town)

You definitely would have been hearing a lot of stories with them [older guys in the sports club], you know, basically what you got up to or did you get pulled-off or how far he went with her as well, you know, and as regards to fingering and you know. I suppose that would have increased my own curiosity of it as well, so, like, I would have been told most things about the facts of life from a much older person. So I didn't learn it definitely within my own family, you know: it would have come from other people and hearing what they were saying, you know, not from my dad, nor my mother, no. It would have been from older friends...

(35-year-old married father)

Once again, the evidence from the older men in our sample shows that in traditional Irish families there was an active repression of anything to do with sexuality, sightings of which caused immense embarrassment.

That was it - there would have been never, there would have no, erm, sex education at home. There was never that chat with your father or anything, you know, or your mother - that didn't happen, like. Now I'm talking about the seventies here, you know, like. If something came on the telly, we only had RTE 1 and RTE 2, so the chances of something coming on anyway were fairly slim. But if something did, the station would be switched, you know. If there was any hint of nudity on the television, like, you know, the station would be switched straight away because it was just, it really was a taboo subject and wasn't spoke about.

(39-year-old married father)

In the vast majority of cases, even the younger men had not been spoken with about sex, love or emotional relationships by parents. In some instances the men recognised their own discomfort at being involved in such conversations with their parents; however, most often the men felt this silence was more to do with their parents' embarrassment. In the small number of cases where parents did talk with their sons about sex, contraception and relationships, it was mothers who did it:

My mum was, she was very, oh she was very, she still is, very open, like. She would say anything, like; she never had a problem in that way and it was just, she would just embarrass you, she'd be like a cringe-factor ten ... But she never ever had a problem ... She always kind of encouraged us read and stuff like that and she would explain, from a young age anyway. I'd never be embarrassed if I asked her anything and I never felt like that I, that I couldn't ask her anything, you know.

(28-year-old separated/shared parenting father)

Educating children about relationships and sexuality is undoubtedly personally challenging work, with which parents and other carers and professionals such as teachers need support.

2.2.2 Schools and (sex) education

The men generally spoke of getting the facts of life in school through either biology class or in a type of social or civics class. In the main men felt they were given sufficient information to reach a basic understanding of the facts of life – that if you have penetrative sex and ejaculate inside a woman she might become pregnant. However, most were still left in the dark in relation to the dynamics and intimacies of sex and relationships and forms of contraception:

I mean you sort of pick it up as you go along from the air, I mean, you know, that you kind of find out about sex ... We did biology in school, so you kind of get a certain sense of something there, you know, it doesn't have any kind of, it's like learning algebra, you know, it doesn't really have any use in the real world. You know you sort of have these diagrams and so on. I'm not really aware where they

came from - certainly not from my parents. Like, the only, the only education I had in the relationship area, certainly formal, from my mother was, 'Respect that girl'. That was her mantra. When I was going to meet that girl up in [place] - 'Respect that girl' - that was what I was told. And what that meant, I didn't know. But, you could interpret it as a warning all right!

(34-year-old married professional)

While some had been told the basics in biology class, almost none had ever been spoken with about sex, love or the dynamics of intimate, physical or emotional relationships, be it at home or at school; none had received even a hint of information about the kinds of post-traditional families and forms of relationships we referred to above. The message from school contained a moral that sex was meant to happen only within marriage and was in any case only for procreation. The data suggests that this compromised the nature of the information the boys/men were given insofar as it did not deal with procreative consciousness and responsibility in the present and the dilemmas and dangers young men have to grapple with. The assumption that sex is only acceptable within marriage is completely out of touch with how sexually active men conduct their sexual lives today and leaves men at much higher risk of causing unplanned pregnancies.

These findings are supported by other recent research on the Irish situation. Fullerton's review of sex education and services seeking to promote positive adolescent sexual health and prevent teenage pregnancy shows that the relevant services remain significantly under-developed and identifies a particular gap in service provision and knowledge concerning what works with young men (Fullerton 2004). Boys need to be educated about sex much earlier than is currently happening, so sex education programmes need to be fully developed in primary schools.

2.2.3 The media and sexual health awareness campaigns

The men in their twenties and early-to-mid thirties spoke of teenage years where they were aware of media campaigns in relation to sexually transmitted diseases, infections and messages about safe sex.

I suppose it's from a very early age if you've any sort of sense of media awareness it hammers this message home, it was almost the mantra for the nineties, about safe sex. I mean, I remember watching the Freddie Mercury tribute concert and it was just from then, I don't know how if you have a television or if you read any sort of a newspaper you can be unaware of the sort of message, and I suppose it worked; I suppose I'm a child of the advertising age.

(22-year-old university student)

However, often campaigns that tackle contraceptive practice and sexual health awareness are selective in their targets and reach.

In university they even have sort of promotion drives to get people to have a think about this kind of thing, and to carry condoms and all this kind of thing, and they even have posters, and in the universities, you know, if you think there might be a chance you're having sex tonight carry a condom, it's both your responsibility, and this kind of thing.

(22-year-old university student)

Safe contraceptive practice and sexual health campaigns should be rolled out to reach the entire population.

2.2.4 Piecing it together: The peer group

In the vast majority of cases, regardless of their age, social background or educational attainment, the men spoke of piecing various bits of information together from a variety of sources, with their peer group playing a key role in how they made sense of the mixed messages through experiences of trial and error.

I can't be, you know, distinct or recall anything in particular but I would have had a sense - it was a kind of fumbled enough way of understanding and knowing - about, you know, sexuality and sexual intercourse and the whole lot. I do remember I was fourteen, fifteen, sixteen, seventeen, or even, what do you call them kind of book, the bodice rippers as they call them, the kind of the Catherine Cookson's and those sort of things; I don't know who actually writes them, now, but the likes of those and where they would describe every kind of passionate, full-on, the whole-hog sex and thinking, 'Oh right - sex,' and literally almost learning it that way.

(39-year-old father)

The real kind of jolt in knowledge base I suppose was when we were, was it fifteen or sixteen, there was a friend of mine and his parents decided that they were old enough, that he was the youngest of the family, to go away on holiday and leave him to mind the house. And we discovered a big stash of pornographic videos his dad had [LAUGHS]. So we used to ... we couldn't understand the dialogue but we used to kind of go up there and ... watch these every evening. Really that was sort of not great for teaching how to relate to females or anything like that, but we were sort of realistic enough to know it was just movies and make-believe in so far as how to kind of charm girls or what have you, but physically, like, it was a big dramatic learning experience for us.

(34-year-old father of two)

2.3 Men's (lack of) knowledge of their own and women's bodies

The impact of a lack of grounded knowledge about sex also emerged in the men's ignorance of their own and women's bodies. Some spoke of using withdrawal from the woman before ejaculation as a method of contraception - the so-called 'withdrawal method' - and disclosed ambiguity about the level of safety it actually provided. Most men who practised it thought that it was not 100% safe, yet used it as a method from time to time - especially if they did not have a condom to hand and the opportunity for sex arose. One man who had lived in Germany during his late teens and early twenties was amazed at

how little understanding Irish men have in relation to the fertility of their 'pre cum'. German adolescents apparently have a very specific term: the 'happy drops', which are spoken about quite openly as part of their sex education. As this man perfectly articulated it, this refers to how "the withdrawal method wasn't completely effective because there would have been some release of semen before ejaculation, but that is as best as I can describe it." (27-year-old single student)

Strikingly, and with only few exceptions throughout the entire sample, there was a low level of understanding about women's bodies in terms of their menstrual cycle and ovulation. A number of men spoke of how women would have told them it was her safe time in the month to have unprotected sex. Unfortunately, on occasion this turned out not to be true. One man wondered out loud in the interview if this notion of a 'safe' time in the cycle had any biological basis at all and if it was just "folklore". Despite not knowing, he regularly had unprotected sex at such times and his girlfriend became pregnant and had an abortion.

The implications in relation to a modern approach to sex education in Ireland are very clear. Firstly, good quality information about the biological basis of men's and women's sexualities and bodies needs to be provided. This needs to include detail about women's menstruation and fertility cycle and ovulation and must be equally clear about the workings of men's penises and ejaculations, covering the risk of the withdrawal method. Sex education also needs to move beyond simply teaching the mechanics and biological facts of life to a more open dialogue about the dynamics and intimacies of sex and relationships.

2.4 Conquest masculinity and the gains of 'losing' your virginity

We tracked the men's early awareness of sex and gender differences. How boys and men form their sexual and procreative identity and their sense of themselves as men can be connected to key transitional periods in their lives. For many of the men, confirmation of becoming a man was conferred on them on the occasion of losing their virginity. The peer group was central to men's accounts of how they lost their virginity – or at least how they told the lads they had lost it. A number of the men pretended to have lost their virginity quite a while before they actually did, so that they would not lose face with their friends. They would share with their friends how far they had got with the girl – although there were some exceptions to this dominant way teenage men spoke together about their sexual conquests.

I just, yeah, I just told the lads, I'd actually have told the lads that I lost my virginity the first time with the girl because I had penetrated her but I couldn't hold the erection and I knew, like, I was, do you know, out of my head and dehydrated and all that, but I decided, 'Right, they don't need to know the whole story, I'll just say yeah, you know, it's done, I'm a member of the club', put it up there, you know, but I did feel like, you know, again what I described that, you know, the first time I kissed somebody, after I had been with this girl I did feel like 'I'm in now', like, you know, I've arrived, you know.

(28-year-old single professional, on first penetrative sexual experience at 19)

This man was asked if the anxiety and insecurity he said he felt about sex was ever discussed with his mates at the time:

Not really, not really - it wasn't spoken about. It was more like when it was spoken about it was very, you know, it was like bravado in terms of conquering, I did this, I did that and you know. Announcing that you'd arrived as a man, like, you know: that you were one of the men, like, you know, so, but there wouldn't, and I suppose at that stage, especially at that stage, you know, nineteen, twenty, whatever, and all my friends at the same age pretty much, like, it wasn't, I don't think young men in general are very tuned in emotionally, or at least to have an outlet to express it, do you know what I mean? It's not that they don't feel it, it's that they don't know how to express it.

(28-year-old single professional)

Most of the men's narratives highlighted how their first experience of penetrative sex was something that 'happened' rather than being planned. Underneath the bravado they were in reality 'fumbling' their way through their early sexual experiences, of 'not having a clue' what to do, or 'where to put it', a confusion that was quite often articulated as 'is that it?' when it finally did happen. Many of the men's first sexual experiences were not as wonderful as they had thought they were going to be.

[So you were 19 when you lost your virginity, what was that like for you?]

Not great, to be honest with ya. Too rushed, you know, this was with the girl that I was with for two months. We talked about it together, all right. I think that is why the relationship broke down, to be honest with ya: you had it [sex] then, and you were kinda like, that wasn't great so I am not really interested now. I liked the girl that I was with her, you know, but it was more of, like, a pally sort of like. I didn't really like her that way, it was a terrible mistake.

(24-year-old, part-time labourer, whose girlfriend became unplanned pregnant three years ago)

This man was a shy teenager who regarded himself as being late losing his virginity at 19 and said his father was more relieved than he because it proved that his son wasn't gay. Men's capacity to enjoy sex and physical intimacy developed as their own experience and confidence in sexual relationships grew. Some men were initiated into sexual knowledge by women, some of who were relatively more experienced than they.

This girl whom I met, who was actually a bit older than me, I was twenty, definitely, she was twenty-three or four or something like that, the usual kind of thing: we met at the night club, I was actually in college at that stage, and that was my first sexual intercourse, in her house actually, over, just in kind of, not too far from the centre of [the city]. Would have just gone back there, gone to a party, smoked a bit of cannabis, that sort of thing. Well, one thing led to another and she brought me upstairs to her bedroom, like, and that was it, like: that was my first ever actual sexual intercourse. So I suppose it was quite strange because she was

a bit more experienced than me - you didn't really kind of know kind of what you were at, you begin to kind of pick it up after a while.

(25-year-old single professional)

Men's awareness of their age at the time they first had sex was clearly influenced by how they measured their sexual behaviour in comparison with their peer group. As one 35-year-old interviewee put it when speaking about his late-teens, "I was very aware that the other lads that I was hanging around with would have been having sex with girls at that stage." For some their naiveté at that time was such that there was some ambiguity as to whether they could get a girl pregnant on the first occasion of having penetrative intercourse, while for many the influence of alcohol was a serious factor in their sexual risk-taking.

Rory was 28 years of age at the time of the interview and recalled how interested he was as a young teenager in learning about sex from the lads.

[So what do the lads at fourteen talk about in (name of the village)...?]

Sex, about ... Ah, you'd be talking about how far did you get, like. So basically just, touchy-feely, kind of, mostly at that age, like, you know, they wouldn't have had sex yet, no. They'd be talking about it and saying, 'Yeah, I'd love to,' you know, like, the big fellows.

[Like, were you one of the lads, would you talk like that?]

Ah yeah. Yes, I would have. I would have...

[Even if it's your, the girl you went out with for four years, would you have told the lads what you were doing with her?]

Ah yeah. Yeah, you would.

[And that was all right for you, that was just...]

Yeah, it was just like, being part of the gang, like: they'd be all talking about the one they met in the disco, like.

(28-year-old man)

Some teenage boys were as committed to the peer group as they were to girlfriends. Rory 'couldn't wait' to lose his virginity, and did so when he was fifteen with a thirteen-year-old girl. The peer-group dynamic played itself out in a highly organised manner. Young people used to gather at the hurling field, drinking cans that his eighteen-year-old aunt had bought for them in the local off-licence. The 'lads' [boys and girls] all agreed to lose their virginity together on a set night, which he did with his thirteen-year-old girlfriend.

I can remember: it was kind of arranged between the four of us that it would happen this month, this day. I can recall for you, believe it or not, and it lasted about ten to twenty seconds [LAUGHS]. Just, nothing out of want of effort but I didn't come. She was more okay for it than I was.

[How did you know that?]

Just from talking, I didn't know that at the time like but just from talking to her about it after it, and it was a macho thing, you know. You held her, her virginity, like. Everyone knew, like, all the lads knew, like, that this is the date.

[How did they know?]

They couldn't have not known - they were just talking about it, like, and sitting down as a group, say. We used to hang around out on the green outside the house. You'd end up telling up like that.

(28-year-old man)

Rory's discussion of 'losing his virginity' is based around the first time he 'put his willie in a girl', not the first time he ejaculated inside a woman. And the achievement was all about being able to go back and tell the lads of his success. It was a badge of honour, where he 'held her virginity' like a trophy.

What was going through my head at the time? I can't wait to go back and tell the lads, that there was nothing, nothing else. At that age it sort of, there was still fellows that had never got it before, like. You're kind of the man.

(28-year-old man)

Another young man remembered keeping the used condom to show it off as proof to the boys. These trophies of conquest sexuality allowed boys entry to the men's club, now they were 'one of the men.' At last, for many of the men the pressure to perform was relieved. Some who lost their virginity at a (relatively) young age also disclosed that they did not have sex again for some time, and in a few cases many years. But at least they were no longer members of the subordinated masculinity section of virgins. In fact the dominant discourse around men's 'loss of virginity' was not one of loss at all but rather one of gain and achievement- at last they were now one of the men.

2.5 Constructions of masculinity and sexual practice

In a variety of ways our data shows the ways in which sex and sexuality become involved in how boys and men negotiate complex identities within a hierarchy of different types of manhood. That is to say, some ways of being men are more valued than others, with gayness positioned as at the bottom of a hierarchy of masculinities (Connell 1995). The type of masculinity that was most revered for the men in our sample when they were growing up, the one that they all had to engage with whether they liked it or not, was an active, predatory heterosexual practice. Their narratives show how heterosexuality is compulsory for men, who not only have to not be gay or even celibate, but have to *prove* their heterosexual nature. This jostling for position among men is not simply a personal thing, but is produced by institutions such as the workplace, schools or other male environments such as the army and sports organisations, all of which are routinely used to produce role models and norms that are exemplars of what men should be.

For boys growing up, the data shows the profound influence of these institutions and the social relations between boys and men in shaping their sexuality. Of relevance here is the different types of schools attended by the men, including a sub group who had spent their teenage years living in all-boys boarding schools. These men spoke of the sense of disadvantage and fear they felt in relation to their ability to easily mix and converse with girls when they left school because they simply weren't used to being around them. They lacked confidence relating to women, and were terrified of sex in case it exposed their lack of experience.

You knew what sex was in terms of the actual physical act of sex. You knew all that, but at the same time to talk to a girl was so difficult because there was no, you didn't have experience of it, you know. That's what I meant earlier about, you know, the social retard: suddenly you have first year in university ... you're talking like dating and, and asking somebody out, or wherever, and that was, that was scary as shit, man. It really was, you know. There was always an assumption as well that everybody else knew more than you: shit, like, 'Everybody else knows more than me', so for a long time you wouldn't bother [asking a girl out] because you didn't bother because you didn't want to ask anybody out in case you fail, but you were fucking dying to at the same time. There was that fear of failure or that fear of everybody else knows a little more than me. I envied them in a way because they were perfectly relaxed sitting in female company. I wouldn't have been as relaxed...

(39-year-old, married father)

Very often the hierarchies of masculine privilege and status were not openly discussed, just presumed, with the boy/man measuring and judging himself against how he imagined the other cool relaxed men were. In highly significant ways boys'/men's practices are policed by the group. Bullying in the context of sport was a key area where boys and men were challenged to prove themselves as men.

Brendan's description of life in a sporting school highlights how certain practices were rewarded while others marginalised and often violently subordinated:

Oh yeah, yeah, well, there was a class system in the school, there was definitely - there was the guys who were there, then there was the guys who were envious of them, and then there was the guys who were talented in their own way but were jealous of, there was very good soccer players there, good golfers, or, you know, they were good at other sports that weren't recognised. And then there were the guys who were very artistic and creative, who kind of lived in fear for their life, you know what I mean - it meant you were gay ... It meant there was a lack of understanding of these guys as well, like, why, why doesn't this guy like rugby, or why doesn't this guy like doing rugby things...

(31-year-old married father of one)

2.5.1 Homophobia and the regulation of men's sexuality

This homophobic fear related to a lack of tolerance of the fact that differences exist within male sexuality and resulted in the peer group regulating itself through violent bullying (see also Kimmel 1994). Brendan remembered, "There was a lot of bullying, there was a lot of ridiculing, it was, it was very difficult. I'm sure it was the same in other institutions around the country but there was a lot of new guys who were very hurt by it, and, kind of, they were very, very traumatised by it." Yet, there were also often unspoken ways in which you could compete to gain status and recognition within such a culture:

I mean, there was things you could do: alcohol was a big factor, you could go drinking, you know, with the guys, you could go with the kind of lead gang, you know - to source alcohol was always a huge thing, as well: that if you had the ability to source alcohol and to sell it, you know, bring it to the guys for Friday night and join in the gang and kind of have a few drinks in the park, or whatever. That was one way which you could gain credit. Another way, of course, was to kind of join in on the back of what was going on, I mean, I know an awful lot of guys, I'm just thinking about one example, now, where I can recall one guy being picked on, quite hard, and other guys that were scared - it could be them - joined in with the picking on this guy just so that they'd, it made them feel a bit safer. Sometimes I was able to walk away from that, put my hand up and say, 'This is wrong. Stay away from these guys - they're bad news,' and then other times kind of just for wanting to be accepted I'd join in. I still feel some guilt over that. I suppose that comes with maturity - that you'd be able to say I should have done things differently...

(31-year-old married father of one)

Among the worst examples of such violence we heard of was where a young man on a rugby trip was "held overboard on a ferry by his ankles. Now if they dropped him he was dead, and they also, apparently, on the same trip, they wouldn't let him use the toilet." Other narratives also exposed how boys and men struggled to develop a coherent sense of self, where simply being physically small placed them at risk of the group.

2.5.2 Shy young men

There was some diversity in the men's experience of growing into active sexual behaviour. The teenage and early adult years of an important sub-group of men in the sample were not defined in terms of conquest masculinity, sports achievements and so on. These men spoke of themselves as being more shy in the company of both boys and girls and hence waited - not always through choice - to enter into (sexual) relationships. This shows how hard it is for boys and men who do not wish to follow the dominant pattern. In a context of potential violence and ridicule, they cannot simply walk away, but have to negotiate their way out of the norms of conquest masculinity - for example, by starting school magazines or excelling academically - responses which themselves carry the risk of the boys being labelled nerds, anoraks, gay and so on. They expressed their sexual identity as a range of alternatives to the dominant, hegemonic construct of conquest masculinity and predatory sexuality, and spoke in terms of self-respect and their desire to protect their own sense of personal and sexual dignity. As one man put it, "Sex is something sacred." These men found allies with whom they formed sub-groups of shy men.

A 34-year-old man who lost his virginity at 19 was part of a peer group who supported one another in keeping the secret of their virginity within "our little inner circle." This peer group consisted mostly of men who had not been to boarding school like he, which he blamed for his late sexual awakening and awkwardness. He regarded his catholic boarding school and his parents (in the late-1980s/early 90s) as sexually repressive. Sex could not be discussed and was shameful. He was sexually abused by a priest teacher at the boarding school. He did not tell his parents, who never found out, despite the abuser eventually being removed from the school. He describes sexuality in this closed all-male environment as leaking out in homosexual behaviour, although it was never described as such.

Like, a guy came in to me one night and said, you know, 'Have you masturbated?' I didn't know what he was talking about so he showed me, and that kind of thing happened, you know. And then you could go messing with somebody else, that just happened; that was a fact of life. But not for long, obviously - it's just, you know, you kind of discovered, I didn't know what that was for really at that stage, I mean, I was, whatever, second year I think at the time. But that did come to a head when a priest came in one evening and I didn't know what he was doing but he did anyway, now it was just, he used his hand and that was it. But I kind of locked that away, like, for a long number of years without having thought much about it. Now, your man got, he got sacked - there was a huge thing in the school about him, it was all swept under the carpet and all this kind of stuff; my parents didn't even find out about it, actually. They thought he was just moved on for other reasons, I suppose. But I suppose, like, I don't know if I ever really, you know, dealt with it properly, but it was there anyway, that was. That was how, that was how you learned about things, you know. It's as perverse as you could get, I suppose. And I mean, had my parents ever thought that anything like this had ever happened in school, they would have, I'm sure they wouldn't have sent me to boarding school.

(34-year-old married father)

Here, adolescent sexuality was both heavily contained within this boarding school environment, repressing any possibility of heterosexual practice, while also enabling

homosexual expression. The pressure, due to homophobia, was to perform homosexuality while identifying oneself as heterosexual, without really knowing what you were. Thus, when asked if he knew his sexual orientation at this point:

I didn't, no. I mean at that point I was just learning, I was just finding my way along and I probably did think that I was gay at some point. And I think a lot of fellows do ... but, I found out very soon afterwards that I wasn't ... I suppose it never entered my head that I could be bisexual, but, no, I mean, I just, I think it was just I kind knew, gradually, very slowly.

(34-year-old married father)

The data, then, supports the role that schools, sport and bullying play in creating and sustaining a pecking order of what is seen as acceptable manhood and sexuality. Marsiglio and Hutchinson in their American study (2002) found that young men's same-gender peer culture also accentuated a penis-centered mentality by emphasizing phallic connections to sexuality rather than procreation. Likewise, this study found that the dynamics of (teenage) men's peer groups, supported by powerful institutions, became a defining feature of how men constructed their masculine self through their sexual practices.

2.6 The importance of using direct and accurate language to describe sex

We learned through the interview process that the language men use carries a diversity of meanings, mirroring well the type of ambiguity and double talk that so many of our interviewees admitted to doing when they spoke of sex amongst their peers. Two particular examples arose. Firstly, we discovered that the physical act of losing your virginity, or having sex for the first time, meant different things to some men. One man spoke about losing his virginity as a young teenager and later in the interview of having sex for the first time in his mid twenties. The distinction he drew was that oral sex was the moment when he lost his virginity, not genital penetrative sex. Another young man spoke historically about not having lost his virginity, although he had penetrated a woman, proposing that while he has put his penis inside different women he has not yet ejaculated inside one of them.

Secondly, we found considerable variation in men's use and understanding of the term 'safe sex'. To some men it had little to do with sexual health and preventing HIV and other infections, while to others it had little meaning with respect to preventing pregnancies. We learned quickly through the interviews to name very directly and specifically whatever behaviour we were seeking the men's views on. For example, some men claimed not to use condoms because "I never came inside her." But it emerged clearly that they had penetrated women without protection and we were able to reach a more grounded assessment of the men's practices. Thus, instead of referring to "safe sex" practices we asked men about "stopping women getting pregnant"; instead of referring to "safe sex" or "sexual health practices" we asked men about "stopping getting infections through having sex". Instead of assuming what "sex" meant, we got men to tell us exactly what they did in their practices, including specific detail about whether they ejaculated inside women.

We recommend that policy and practice adopts terminology that avoids ambiguous terms like 'loss of virginity' and 'safe sex' and spells out the actual behaviours in question.

2.7 Conclusions and recommendations for policy and practice

In general the interviews showed a significant shift in the sexual attitudes and behaviours of men in Irish society over recent time; this was evidenced mainly through the narratives of the men in the sample who were younger than 35 years of age. Their narratives demonstrated a growing liberalisation of behaviour and attitudes towards sex before marriage, with sex frequently being described as part of a recreational lifestyle. This data shows men's lives are complex and multi-layered and expressed in different forms of sexual practices and ways of being men (masculinities). Yet a striking finding of the research concerns men's general lack of procreative knowledge and the absolute poverty of efforts that are made to give boys and men good quality attention and information. Young men typically emerge into adulthood in Ireland without having received any constructive support or information about themselves as sexual and procreative beings. This absence of mentoring support, challenge and information-giving carries on through adult men's lives. Any assumption that sex is only acceptable within marriage is completely out of touch with how most of these men conduct their sexual lives today and leaves men, young and old, at much higher risk of causing unplanned pregnancies.

With regard to sex and relationship education we recommend that:

- Boys and men should be provided with detailed functional information about: sex and how pregnancy occurs; sexuality; the workings of the male and female body: genitalia, fertility and so on.
- In doing this great care is needed in the choice of language used in sex and relationship education, mentoring and work with boys and men; language needs to be as behaviourally specific as possible in naming the sexual and contraceptive practices in question. Men, our findings suggest, are well able to cope with such directness. Terms such as 'safe sex' should be avoided because they mean different things to different men, and the actual 'safe' practices should be spelled out.
- Meaningful information be given about intimate relationships, responsibility, preventing pregnancy, and sexual health; the way in which this information is delivered should deal head on with men's fears, uncertainties and vulnerabilities and it should be grounded in the realities of men's active sex lives today.
- Boys need to be educated about sex much earlier than is currently happening. Sex education programmes need to be fully developed in primary schools and their effectiveness evaluated.
- Teenage men's peer groups need to be worked with in a way that promotes procreative awareness, responsible contraceptive practice, sexual health, respect for women and careful drinking and drug use.
- Parents need support in communicating with their children/young adults about sexuality and responsible contraceptive practice. Services to support parents (counselling, training, helplines, websites), strategically targeting fathers as well as mothers, should be developed in such a way as to give them the knowledge and confidence to engage with and support boys' and young men's sense of themselves as procreative beings.
- Safe contraceptive practice and sexual health campaigns should be rolled out to reach the entire population.
- Action should be taken on homophobia and bullying in schools, sports, and other contexts where young men meet. The aim should be to develop an awareness and tolerance of the variety of ways there are of being a man and expressing male sexuality.

3.0 The meanings and values that heterosexual Irish men attach to sex and sexuality: Men's sex lives and patterns of sexual practices

This chapter explores the meanings and values which Irish men of different ages attach to sex and sexuality by examining in detail the sexual behaviour of adult men. Key themes include how heterosexual men define their sexuality, how they negotiate - or fail to negotiate - sexual intimacy and contraceptive responsibility (although we give special attention to contraceptive practices in the following chapter), and how factors such as socio-economic background, age and constructions of masculinity influence men's sexual behaviour and procreative responsibility. We examine the degree to which men make the link between procreative consciousness – knowing the facts of life – and allowing this awareness to become part of their everyday behaviour of (responsible) sexual practices. The chapter identifies a number of key pathways that men take in the expression of their (hetero)sexuality and considers the implications of these patterns for policy and practice in preventing crisis pregnancies.

The data also suggests that for some young men the peer-group pressure to lose their virginity was so strong it pushed them into full penetrative sex before they ever really internalised a real sense of themselves as being able to impregnate a woman. The data further suggests that men only develop a true procreative consciousness and demonstrate responsible sexual behaviour, such as regular condom use, when they become aware of their ability to impregnate a woman

Lack of confidence, good quality information and experience mean that in general men are at their most dangerously irresponsible with respect to risk of unplanned pregnancies during first experiences of sexual intercourse. We have already begun to propose ways in which this situation can be made safer for all concerned. The critical issue that follows from this concerns the extent to which men learn from experience and the kind of procreative responsibility they integrate into their developing sense of self as a man.²

We were careful to draw from the men's narratives the meanings that responsible sexual practices had for them, as opposed to us imposing a definition from outside. The most consistent definition of procreative responsibility for men so far as contraception was concerned to emerge across the interviewees concerned condom use. Being a sexually responsible man involved always carrying and using a condom. Men varied considerably, however, in terms of how, or even if, they turned this principle into regular condom use or use of other forms of contraception in practice.

3.1 Men's sex lives and patterns of sexual practices

In general, the men in the study were conscious of the risk of pregnancy during unprotected sex. For the most part their narratives reveal a general pattern where their

² We emphasise *procreative* responsibility here rather than just *contraceptive* responsibility as a minority of men in the sample chose to abstain from sex before marriage as a way of being procreatively responsible, making contraceptive use an irrelevance. Procreative responsibility also extends beyond birth control to profound issues such as the man's response to unplanned pregnancies. Men can be contraceptively irresponsible but procreatively responsible in the sense of supporting the woman through a pregnancy and becoming a good father.

behaviour developed over time to reflect their growing sense of responsible contraceptive practice. On the other hand, we found significant gaps between men's level of knowledge of the possibility of getting women unplanned pregnant and their development of an active sense of procreative responsibility, such as a disciplined contraceptive practice. There was considerable variety within these general patterns, however, and it is crucial to the development of effective preventative policies and practices to do justice to the different ways in which heterosexual men practise sex and contraception. Quite simply, some of the men took far more risks than others, but there are considerable subtleties in men's sexual practices here that need to be drawn out.

Even within a relatively small sample of men we found huge variety in the sex lives the men led and in their relationships to contraception and procreative responsibility. At one extreme, a sub-group of men weren't very interested in sex and practised little of it. Sex played a relatively small role in defining how they saw themselves as men. At the other extreme, a sub-group of men were extremely sexually active – both in the number of sexual partners they had at any one time, and in the regularity with which they said they had sexual intercourse with those women. Meanwhile, in between these extremes were sub-groups of men who had quite regular sexual experiences and to whom sex was important, but it was one among other aspects of their lives that defined their identities as men. We want to suggest that these diverse sexual practices and pathways are best characterised as 'patterns' of sexual practice, as opposed to being represented simply in terms of men's personalities or biology. Character and attitudes certainly come into it, but the findings suggest that the men's behaviour was also influenced by social and cultural factors. The notion of 'patterns' tries to do justice to the multiple influences which shape men's practices and to the fact that men do not all stay in the same pattern, as some men's sexual practices change over time.

3.1.1 Hedonistic pattern: Chronically irresponsible, narcissistic pleasure-seeking

A significant sub-group of men (a fifth of our sample) portrayed themselves as extremely sexually active and as never worrying about using contraception during sex. As one man put it, "I just never got used to using condoms." These men's narratives are filled with stories of sexual conquest, insatiable sexual appetites, and explicit portrayals of what they liked to do sexually with/to women. One 41-year-old man described his sexuality as "Ravenous, ravenous", and explained how over the years, "it wouldn't have been uncommon for me to have had sex with three or four different girls in the same day." Although able to gain access to condoms, he hated them and practised unprotected sex whenever he could, seeing condoms as an assault on his pleasure and construct of virile, predatory, male sexuality. Others claimed to have sex three or four times a day (with the same woman), while a variety of estimates of the total number of sexual partners they had had were offered, the highest being 200.

Matthew, 22, grew up in state care and had moved through various foster families and children's homes. He makes his living working as a professional and has a part-time job in night clubs - 'getting paid to enjoy myself' - which provides a constant supply of women.

You know the way girls go on anyway. They come back from the pub and they're locked, and you're locked yourself anyway. You don't give a shit if you're wearing a johnny or not because ... well, you should, but back three or four years ago when you were in college, you didn't give a shit because, 'Oh, I'll shag this one' and that's it, kick her out of the bed later. That was your attitude in college: Lads, 'Oh what did you get last night?' or 'What was she like?' like, you know. But, to be honest with you, not being vain now, but it's over two hundred [sexual partners/one night stands], seriously.

(22-year-old single professional)

Although the historical reflection suggests he has changed since leaving college, it becomes apparent as he describes his attitude to sex today that he hasn't.

Em, I mean, you're out with the lads having a few pints tonight, you know, well, whatever, right. You're out having a few pints with the lads and you do this one, you do that one, 'What did you do with her last night?' or whatever, you know. You know the way lads carry on ... when you're out and you're having, on the piss, you go home and you have a one-night-stand, and all you want to do is have sex. Shoot the load, and that's all you want to do. That's every man's mission for the night, if you want to put it that way.

What? And you think women don't think about that, but women think in the same way, so they do. They do.

(22-year-old single professional)

At the core of this hedonistic pattern is narcissism and a relentless self-absorbed pleasure-seeking, which goes hand in hand with a disregard for the dangers such behaviour represents and the needs of others, namely women/sexual partners. The men's own sexuality – which is seen as typifying men's sexuality in general – is represented as containing a powerful biological imperative to have sex, which justifies a predatory need to 'get it'. Women's sexuality is constructed in equally predatory terms. But women are positioned not as the beneficiaries of pleasure through men's sexual prowess, or as sexual equals. The men want someone to have sex with so they can reach orgasm. Such procreative irresponsibility extends to strategising about how to avoid being found out by women on one-night-stands if they should get pregnant. As one man put it, on going back to their place you are "planning your escape before you get there," to avoid waking up beside them or being 'caught'.

In focusing here in some detail on the attitudes and behaviours of this sub-group we want to be careful not to be perceived as castigating men who are liberated and like sex – that is not our purpose. Our assessment of the hedonistic pattern – like all others – rests on the implications of sexual practices for policy and practice in relation to crisis pregnancy and sexual health. Thus, it is not the sexual practices, liberated or otherwise, of men that we are critiquing, but the degree of responsibility for preventing pregnancies and STDs evident in men's practices.

Consequently, in what we are calling the hedonistic pattern, all responsibility for contraception and dealing with the outcomes of sexual encounters, whatever they might be, are left to women. Larry, 27 at the time of the interview, recounted his past behaviour up until the age of 23 – he claimed to have 'settled down' since the birth of his child. His interview exemplified the hedonistic pattern. He drifted happily through life, dropping out of third-level courses as they began to bore him. He used women and sex in the main for enjoyment, although he believed that the women were enjoying themselves too, and seemed confident in his abilities to "pleasure women." He joyously remembered losing his virginity in a tent at an open-air rock concert, with a woman who was already pregnant. He celebrated the occasion by keeping the used condom to show his pals, as proof of his conquest. After that occasion using contraception was not something Larry worried about, except "sometimes if it was handy". But condoms were never a necessity as far as he or, he claimed, many of the women he spoke about were concerned. For him the issue of safety and risk was defined by his belief that it was up to the girls to look after themselves:

It was their body - if they didn't mind too much about no condoms I'd just carry on, like; if they protested a bit I'd say I'll pull out.

(27-year-old married father of one)

He clearly exhibits strong misogynist attitudes and behaviours towards women and their requests for safe sex, by his own account preferring not to use condoms. Even if a sexual partner insisted, he would try his best to defy her request. He would not wear a condom and say that he would withdraw and come outside her, but often did not do so. He volunteered vivid descriptions of times when he did withdraw of ejaculating over women's bodies, which he described as "a bit pornographic".

Larry's account of his 'pornographic' sexual behaviour can be read as clear evidence of an underlying misogyny to his narrative. He attempts to take the control of contraceptive responsibility away from the women by defying 'their' requests for a condom and attempting to deny 'their' request to withdraw before ejaculation. A key aspect of the hedonistic pattern is what Morris (1996) calls 'non-relational sex'. Here sex is seen as a performance and conquest by men who at best struggle to develop the ability to give or even receive pleasure, in the more intimate sense of loving exchange through sexual encounters. For these men sex is the only way they feel able to connect intimately with women and with themselves. Through penetrative sex they can get close physically while remaining distanced emotionally. This ultimately fails to satisfy because the sex is so non-relational and the pattern repeats itself and they keep coming back for more. At its worst, the hedonistic pattern is characterised by misogynistic attitudes where women and their sexuality are positioned as a dangerous, polluting presence, which needs to be dominated and humiliated. Such dynamics can lead to the complete objectification of women and an eroticisation of dominance which results in the use of pornography and various other forms of sexual and physical violence (Kaufman 1997, Kimmel 1990).

Typically, men in the hedonistic pattern actually had limited knowledge of what the outcome was of many of their sexual encounters.

There was one girl I think that took the morning-after pill after having sex without a condom the night before. There would have been the withdrawal method, of course, and all that, and maybe because a lot of the times I slept with girls I wouldn't have had that much to do with them the next day, so maybe they went away and did it themselves. I am not sure they looked after themselves but I assume that, I am sure they wanted to take care of themselves a lot more than I wanted to take care of them because it would have been just a drunken shag or a pull in a night club, or whatever.

(27-year-old married father of one)

The caveat that made a difference in Larry's involvement in managing the morning-after pill and having any concern at all about contraception more generally was the context of the relationship. If he felt he was actually in a meaningful relationship, he paid more attention. Meanwhile, his main concerns about safe sex related to the risk to his own body and possible infection by a sexually transmitted disease. Larry eventually got caught out – or at least he found out that he had got caught out as he simply didn't know how many other women he might have got pregnant. At the age of 23 he married his girlfriend when she became unplanned pregnant, the one woman that actually meant something to him emotionally. They married despite her telling him she had been pregnant previously in another relationship but had chosen to terminate the pregnancy. Neither that nor her discussion of previous sexual partners had any negative impact on Larry's feelings towards her. For him, the decision to manage her previous conception in this way was hers alone – given that the pregnancy related to her body – a position in line with Larry's attitude to procreative responsibility. Becoming a father was for Larry "the best thing that ever happened to him" and it stood out as a turning point in his narrative, making him take real procreative responsibility; he claimed that since the birth of his daughter he has been faithful to his wife.

We deal in more detail in the next chapter with the issue of the kinds of turning points, such as unplanned pregnancies, that make a difference in how some men learn to become more procreatively responsible. Larry's journey from a hedonistic pattern to one of relative stability and responsibility raises the question of whether the hedonistic pattern is essentially an expression of age and the life course: a stage that (young) men go through in their late-teens and early twenties when supposedly high in sexual energy and eventually grow out of and settle down.³ We found evidence to both support and refute such a hypothesis. On the one hand, as we show below, there is a distinct pattern of sex taking on less significance for men as they develop and take on other responsibilities of children, family life, work, the challenges of keeping a long-term relationship sexually fresh, and so on. Yet not all break the hedonistic pattern. Some in the sample, despite (or because of) being in a committed long-term relationship/marriage, have affairs. Other men simply never develop a responsible sexual practice, irrespective of whether they are in committed relationships or not.

³ We stress 'supposedly' because the data does not support the idea that all men see their sexuality in the same way and have such a biologically driven imperative to have sex.

The persistence of the hedonistic pattern through a man's life-course is most evident with respect to the oldest men in the sample. Albert, 57 and living alone at the time of the interview, constantly referred to women as sexual objects and was concerned about the lowering of women's standards where "the young ones were going around almost naked." His discomfort seemed more with the development of women's sexuality than the fact that society was in general more liberal. He made constant reference to sexually active women as being dirty, impure, contaminating. Yet he personified a type of masculinity that celebrated men's active sexuality while condemning women as sinful impure temptresses.

On the occasion of losing his virginity at 16, Albert represented himself as not responsible for either the sexual intercourse or his (non) use of contraception.

Well, I think she had sexual intercourse with me [LAUGHS]. Well, one thing, now: she was in the driver's seat. I just stood there and that; before I knew it she was on top of me, and her fur coat was on me and we were doing it and I, I still was very surprised, was amazed at how quick it happened [LAUGHS] ... It took me by surprise. She was twenty-four and I was sixteen. I, I didn't open my mouth there, but yeah. She was the boss. I, well, I mean, I thought I had discovered something that nobody else in the world had discovered. I didn't want to tell anyone my secret. She had her wee fur coat wrapped me, she wouldn't let me go. Actually, I had a fur coat wrapped around me, as if it was safe. I went into the house that night, my mum asked me [LAUGHS]. I said, "Never you mind, never mind mum," you know. But I certainly thought I found a pot of gold, you know, and I didn't want to tell anybody the secret. That was my first really.

(57-year-old single man)

He did not use contraception because in the 1960s, sexually, "the sky was the limit [and] people were extremely clean." He seems to have been introduced to condoms by women he paid to have sex with him: 'dirty' women. Albert also made passing reference to a number of women who might have conceived his child, although he still to this day neither knows nor expresses any real care as to whether the children were actually conceived or born or whether he is the father. The first time he denied his paternity was at 19 years of age. He got out of prison after a short sentence and was met by the woman in the fur coat who presented a child in a buggy as being his child. "I suppose it might have been mine but it would have had to have been a shotgun conception." His shotgun conception seemed to relate to ejaculating on the outside of the woman's body, a form of withdrawal. He settled for the chances being that the child was not his and moved away from the area. On another, more recent, occasion he heard rumours that he had made a girlfriend pregnant, and blamed it on the propensity of locals "to spread rumours just for gossip and hearsay." Yet, he never asked the woman herself if there was any truth in it.

On a third occasion Albert spoke about another woman who claimed to have conceived and given birth to his child, something that on this occasion he felt was more likely to be the truth. Here again, they never talked about birth control. Once again this woman

dropped out of Albert's life story, leaving him once she realised she was pregnant, returning, he thought, to live with her father - although again he did not follow her to check if she had the baby or if he was in fact the father. Later, some time after the birth of this child, he did have some brief contact; however, this was not a relationship that was continued or developed and again he lost contact with both the woman and the child he presumed he had fathered. His non-reflexivity regarding procreative awareness throughout his life is exemplified by how, when pressed on why he did not see condom use as an important form of contraception, he said, "I think we were kind of naïve, you know. I mean, I'm fifty-seven and I'm naïve about some things." Taking him at face value, his at times confused narrative about sex, responsibility and whether or not he is a father could indeed have been a measure of an incomplete understanding of the facts of life, even for a 57-year-old man. If that is the case, it is a striking indictment of the long-term effects of failures to provide men with good quality information and mentoring. On the other hand, at a deeper level, we can speculate that he demonstrated enough knowledge of sex to have learned what responsible behaviour meant, but his failure to do so merely mirrored his ambivalent attitude - if not downright denial of - procreative responsibility. Sex was something Albert did, and as far as he was concerned what happened afterwards was neither his responsibility nor concern. His view of men's procreative responsibility was a passive one, with women controlling and contaminating men. Condoms, when used, were about sexual health and protection from dirty women, not about stopping pregnancy.

Fred, 48, provides another vivid angle on how the hedonistic pattern extends through the life course. He grew up learning the ideal was sex within marriage - 'It was a mental illness to get pregnant [out of wedlock]' - but he did not practise that. On leaving school his job took him away from home and he organised things in such a way that he could be working in a place where 'there'd be a dance there or a big marquee there that night; well, there was bound to be loads of women so I'd make sure that I'd be in [name of village]'. It was all 'Wine, women and song, but with a steady girlfriend back home that I was going to settle down and have the kids with and build a house and live happily ever after.'

The way in which he was away from home, on the road, allowed him to compartmentalise his life and sexuality in a very interesting way. Fred has never worn a condom, or for that matter carried any sense of procreative responsibility.

Well, up until I got married, eh, pregnancy had never entered my mind: that if I had sex with a woman that she was going to get pregnant or there was going to be a danger. I probably knew that there was a danger but then I probably thought, well, it was going to be her responsibility; that would have been the way I looked on it, you know. Like, some of my girlfriends that I had were married, and probably looking back on it, I thought it was up to them, like, you know.

[48-year-old married man]

Interestingly, the issue of ignorance about procreativity again raises itself. While he was aware of the facts of life, in his consciousness he had somewhat understood that it was only really sex within marriage that led to pregnancy. Following marriage he soon

became a father and felt that all he had to do at home was to put his “pants on the bed and she got pregnant.” He continued to have affairs, the most recent with a work colleague. He did not use any contraception and did not inquire from her if she did either. She missed a period and her profound fear that she was pregnant eventually turned out to be wrong. The meaning of her pregnancy scare for Fred did not relate so much to the fact that he was married with children but that she was married to a very jealous man whom Fred feared would kill him. He did, however, also ponder what it would be like to live his life knowing that his “flesh and blood” had been born into another man's family. This illustrates how the hedonistic pattern can manifest in crisis pregnancy scenarios, where the ‘crisis’ for the man appears more in relation to the anticipated impact on him (a feared backlash from others, of violence, being ostracised, shame and so on) than the outcome for the woman or child or others affected.

The reasons for the apparent resistance to learning and personal development that characterises the hedonistic pattern go beyond the issue of men's individual personalities, however much the issue of sexual ethics do come into it. Such hedonism, like all forms of sexual practices, is best understood as a ‘pattern’ because of how it is socially and culturally produced. The men who embody the hedonistic pattern are the adult equivalents of the much larger population of younger men profiled in Chapter 2 who began the transition to manhood in terms of ‘losing’ their virginity through practising a conquest masculinity. As we showed in Chapter 2, the creation of diverse masculinities is grounded in the social relations of power and pleasure between men. Changing the patterns of men's sexual practices to create safe practices and more egalitarian relationships needs to involve exposing and altering the institutional and personal dynamics that contribute to the creation of dominant forms of masculinity. These forms of masculinity impose on men definitions of normal heterosexuality which result in the exaggerated, exploitative forms of behaviour that characterise the hedonistic pattern. The key implication is that breaking the hedonistic pattern is not simply about age and life-course development, but related to other factors, such as the adoption of a ‘conquest masculinity’, which we shall also refer back to and summarise in the conclusion of the chapter.

3.1.2 Steady pattern: Shyness, decency and sex as a romantic, spiritual quest

Sex for some of the men was not always about conquest, scoring and gossiping with other men. In talking with men about the trajectory of their lives and procreative identity we were interested to plot with them if and how they experienced a development in their own sexuality. It emerged that some men aren't that interested in sex at all; or, put more accurately, perhaps, they understand their sexuality in a way that means they do not feel driven by testosterone and primal biological needs. These men were only interested in having sex on their terms, when they could be sure certain ethical and spiritual conditions were present. This we shall characterise as the ‘steady pattern’.

Seamus, a 31-year-old married father of one, remembered his sense that being a virgin late into his twenties set him aside from his own brothers, but his sense of his own romantic side seemed to ease any sense of pressure to become sexually active before then.

I would say that in relationships I would have been romantic, definitely romantic. I mean, I would have been a great lad for writing letters and, you know, lovely poems that would probably make you puke now and, like, little romantic presents and all those sort of things, so I certainly would have been in to that. Things, you know, like buying a ring and having it, make sure that, like, I kept little things for years and years, even going on into to my, kind of, early twenties I would have kept, your little, I'm like the girl almost, little box of secrets [LAUGHS]. I was going to say maybe I'm gay but I'm not. And like quite, I wasn't quite touchy-feely but certainly very much kind of hand holding, cuddling and kissing and, you know at that age. And happy with that and comfortable at that and really enjoyed that...

...And never felt any great, like, literally urge or sexual urge to say "Jesus I want to actually have sex now." I don't know why it didn't sort of enter in to it. I don't know whether it was a kind of not confident about it or I don't know, but I was happy with what was there. I mean, it wasn't just, you know, I mean, I'd certainly had the kind of 'roman hands and russian fingers' and, sort of, I wasn't afraid to explore the delights of the flesh. Well, I can remember actually that kind of stuff in the, you know, sitting in the car and having a cuddle and a feel and all that but you know don't, don't recall any great mad desire to get, to get it on.

(31-year-old married father of one)

Once again, however, Seamus's language reveals signs of the subtle, constant dominant message that there is but one true construction of masculinity. Anything other, in particular being seen as romantic, created the tension that you might in fact be gay. He then seems to use the interview as a space to prove his heterosexuality by drawing attention to how he was keen to indulge in petting - as he describes it, '[exploring] the delights of the flesh' with his 'roman hands and russian fingers'. Thus, even within the context of a research interview, men's heterosexuality is something that needs to be *performed*, protected, proven, to ensure - no matter what vulnerabilities might be shared with the researcher - you would never be mistaken for a homosexual.

Yet this did not stop men taking considerable risks in the interview situation, in the sense of the sexuality they placed on display. For instance Aaron, a 34-year-old middle-class professional, was expecting the birth of his first child any day. Married for ten years, for a long time the couple had actively chosen not to have children, happy together and enjoying comfortable living standards as part of a clear plan to their life's project of enjoying the countryside, books, CDs, and so on. A change of lifestyle freed them up enough to contemplate having sex without contraception, open to the possibilities of conception.

Aaron openly spoke of his shyness as a boy and teenager. He was bullied in primary school and remained a loner throughout secondary. He spent time in a seminary reflecting spiritually before entering into the world socially, really for the first time as a twenty-something. He met his first girlfriend at a Catholic youth association and soon after had his first kiss. Aaron subsequently met the woman who would become his wife; she helped him develop his sexual confidence and they moved in together and became engaged. His narrative about his sexuality was framed very much within 'a sense of decency':

I think my sense of sexuality and all that would have been tied up less in piety but more in sort of a sense of decency. You know, that is in part associated with piety, but is not entirely the same thing, you know. Decency could allow you to make love or have sex before you marry her, but, you know, you had to treat her right, kind of thing, you know that feeling.

(34-year-old married professional, expectant father)

Living a very shy, reserved sexual identity and practice before and during a long-term committed relationship or marriage did not mean that men in the steady pattern didn't care about sex or experience loss if it was absent. Because sex for them is so tied into their spiritual and emotional lives, their sensitivity and desire to feel in tune with their partners could lead to feelings such as rejection. Aaron's relationship with his wife went through a phase when sex did not happen at all and he spoke of the frustrations he experienced being married at that time to a woman who expressed no desire for him sexually:

It was very, very frustrating, you know, sexually frustrating and, and emotionally difficult because I felt rejected all the time. And physical contact became kind of loaded. When it became that every physical contact was a lot at the stage, so that if I tried to give [wife's name] a hug it was loaded with a significance, which was 'come on let's go to bed', rather than I'm just giving you a hug, you know. And for me, then, of course, if she responded to any kind of physical gesture that I would make, I'd probably think, 'Oh we're away here', you know, 'This is our moment'. So it's, so, and [wife's name] knew this, and was like trying, and was really anxious about it and anxious that I was being rejected, and anxious, I mean, to say to me that she wasn't rejecting me, that it wasn't rejection. So, you know, there was a lot of frustration I think, on both our parts really, like, 'Why won't this work?' you know, but it came to point where [wife's name] said, 'Look, will we break up?'

(34-year-old married professional, expectant father)

They attended marriage counselling for a time and learned the importance of talking together about their sexual needs and desires. "It's been great, you know. And we therefore have been able to talk about it more freely."

Such struggles were not restricted to shy men. For some men for whom sex was an important part of their self-definition it was an arena of struggle and sometimes pain as they accommodated to a low level of sexual activity in their relationship(s). These men had learned from experience just how important sex is within a relationship, and how difficult things can be when sexual energies do not connect.

It would be easy to draw from this a stereotype of sexually repressed Irish men struggling with the hang-ups and hangovers from traditional Catholic Ireland. But this would be mistaken. We have already suggested that these men were in many respects very post-traditional in how they approached intimate relationships, or at least no less open-minded than the more sexually active men. In addition, we found evidence of men

who were quintessentially post-traditional - urban, cosmopolitan, artistic - who had chosen to be extremely selective about sex. One man in his mid-thirties explained in great detail how he had spent a lot of his adult life turning down offers of sex from women. What interested him was the *quality* and depth of the emotional and sexual connection he could develop with women - and he had developed his spirituality and knowledge of tantric sex accordingly.

These narratives provide further evidence of how some men develop alternatives to the dominant sexuality framed within hegemonic expressions of masculinity. A self-perception of men's sexuality as being restrained and under their control co-exist with notions of shyness, romanticism, 'decency' and sex as a kind of spiritual journey, contrasting starkly with hedonistic, conquest masculinity - thus exposing the diverse ways of being a sexually active man in Ireland today.

3.1.2.1 *Steadiness and the (re)negotiation of sex in long-term relationships*

We explored how men experienced sex through the course of their committed relationship, the place of sex in such relationships and the flow of sexual energy between committed couples. The general pattern was for sex to become less frequent and for its meaning to change within the long-term relationship. It reflects an aspect of the steady pattern in terms of the 'steading up' of the man and maturing of his sexuality. While some men enter the steady pattern straight from adolescence, others move into this pattern from other patterns. Larry, profiled above in Section 3.1.1, is an example of one direction of movement: a man who became monogamous and faithful to his wife after years of hedonistic behaviour.

The arrival of children had a particular impact in changing the nature of intimacy. Classically, the sudden presence of babies and toddlers in the marital bed changed the rules about sex, as did, in some cases, men's experiences of their partner's menstrual cycle:

We had a fairly active sex life, now, always ... Basically, that I would, at least five, six times a week, you know, I used to come home at lunchtime even and expect sex then as well. But then I knew that there was, with her, always this thing, you know: I would have two good weeks of having sex and then for the next two, I know it's a no-go area, because that's the way she felt at the time, you know: she wasn't having sex for two weeks before her period. She just didn't feel up to it at all; she wouldn't even dream of it. We would have talked about it, yeah, but then she would have always said that I was always pushy enough on the whole thing, you know. She would have said to me, 'Well, I can't even have you close to me then,' basically, then, so usually about a week and a half before her period was due, you know. I'd have the higher drive, but you learn to cope with it. She'd tell me to basically go and have a wank. So I would do too, and that's how I cope with it.

(35-year-old new father)

Work impinged on sexual performance as men struggled to have enough sexual energy at the end of a tiring day.

[We make love now] two or three times a week; it wouldn't be that much. It wouldn't be every night. I wouldn't be able to do that - I would be too tired, to be honest with you. I do be working during the day, and some nights.

(22-year-old cohabiting father)

Ironically, given all past efforts to avoid pregnancy, at least two of the men spoke about choosing to 'try' for a child and their struggle to conceive. One man related the negative influence that commuting and not having a secure job had on his sexual energy and propensity to actively try to impregnate his wife. Another spoke of the physical pain in his penis during sex and how wearing a condom eased the pain but then made trying to ejaculate into the woman difficult. There was a general concern that sex oriented to procreation, while loving, was now more mechanical, timed and tested to clinical precision.

Being in a long-term committed relationship was no guarantee of making sex easier to talk about.

I would chat away in bed, talk about this and that and talk about what she wanted and what I wanted, you know. I think it is a bit intimate to be talking about sex; I don't really like talking about sex, to be honest with you. I would sooner do it really, than talk about it. I don't really like talking about it. It is just me, I suppose.

(22-year-old cohabiting father)

For two men who were now married and had children, their vasectomy was an active attempt on their part to maintain a sexually active yet procreatively managed marriage. However, another married man and father of four explained his reason against ever having a vasectomy: if anything ever happened to his children he felt he would like to know that he could produce more. Thus discussions about vasectomies show strong evidence of how central procreativity is to the narrative of self that some men have developed.

Here again, evidence arises on the need for men to be assisted to learn to find an authentic voice about their needs and responsibilities and become skilled in articulating them. One man celebrated how attending marriage counselling after a fourteen-year-long marriage actually helped him develop the skills necessary to successfully negotiate with his wife his decision to have a vasectomy.

We talked about the vasectomy for a long, that was a long talked-out discussion, and I would have been the stronger part of the two of us with that, because I felt I didn't want any more children, like, after fourteen years, and I think that's a thing that men do sometimes, you know. Like, I can find if I'm taking a decision, from me this is how I feel, and we spoke about it and we were going to marriage counselling at the time and before we'd just row and then we wouldn't talk about it again, but because we were able to talk things through, say, 'Okay, this is important,' well then I go and get it, and that was the decision around that.

(36-year-old married father)

Some men, of all ages, spoke of the difference between having sex and making love (men within the hedonistic pattern, discussed above, were notable exceptions).

I would see a difference, yeah: making love is really close and having sex is getting it out of you. That's a bad word, but making love is more intimate, more softer.

(22-year-old cohabiting father)

I kind of feel that sex is better in a relationship as an expression of, of love. I mean, it's all so powerful. I mean, sex is great, that's a fact, but, I mean, so long as I'm single I'm not, I'll have one-night-stands and stuff like that, you know what I mean. Let's not bullshit, but I do look for something more; I do want to have that kind of a connection with somebody.

(23-year-old, unplanned expectant father)

One man explained at length his dedicated practice and enjoyment of tantric sex, while others were engaged in a project of sexual development, feeling they were learning to become better lovers. They tried to focus on being able to give more sexual pleasure to their partners, more emotional expression and to be more fully satisfied sexual beings themselves.

I learned I suppose through [wife's name] how important it was to satisfy a woman. Like, I never really kind of thought about it, I was so preoccupied with pleasuring myself, like, and making sure that I had a good time without giving any kind of real thought to, how would I say it, if a woman had an orgasm or not - it didn't come into my thinking at all. If she did, and she said she did, it was great, like, but I never understood - again, this is all part of growing, I suppose, and learning and experimenting. But now I would find much more pleasure in satisfying a woman and bringing her to orgasmic fulfilment and then maybe I could, and if we were to reach orgasmic fulfilment together, well, it's even better.

(41-year-old separated father)

In general, then, this sub-group of men can be characterised as embodying a 'steady' pattern of sexual practice, having learned and developed their relational awareness through their life course. In stark contrast to the hedonistic pattern, their depiction of

their sexuality is much less predatory and biologically driven, and much more grounded in the lived reality of negotiation within a sexual relationship. Generally, this includes a much more respectful view of women than is evident in hedonistic men's accounts and shows men taking much more responsibility for contraception and sharing in decisions to have children. Also, as we show in Chapter 6, in situations where unplanned pregnancies ended in abortions the quality of empathy these men had toward the women's feelings and position was qualitatively different to that of men in the hedonistic pattern.

3.1.3 Impulsive pattern: Sexually active, generally responsible, but occasional risk-taking

The above description of men in the steady pattern should not be taken to mean that all men in long-term committed relationships are faithful, steady partners, or that negotiating birth control is trouble-free. Two married men spoke of how their first child was planned, while the later children were not. One man even thought his wife had used the later pregnancies to 'keep him' in the 'dying' marriage. Three men had been found out having affairs, leaving their marriages in deep trouble. One man was consigned by his wife to the spare room for a year, while they kept up a façade of a happy marriage to the world. Recently his sex life had recommenced due to his wife's wish to conceive a second child. He felt quite ambivalent about performing sexually with the sole purpose of conceiving a child, given that his wife proclaims that she feels nothing for him because he cheated on her. But he also saw the opportunity to make love as possibly bringing some healing to their relationship.

Men who have affairs are just one example of how many men's sexual practices do not always develop in a linear fashion. They take risks, both with relationships and with unwanted pregnancies. The data suggests a category of man to whom quite regular sex is important and who, although essentially responsible in their contraceptive practices, are irregular risk-takers. Their impulsive risk-taking is often driven by situational factors, such as excessive alcohol consumption. Problems in or the break-up of a relationship can also lead men previously in the 'safe' (see below) or 'steady' patterns into impulsive behaviours where they take significant risks. Again, the very high rate of pregnancy scares among this sample of men bears out that the normative position is one where men in general are prone to the impulsive pattern. The tendency that we have shown for men to have unprotected sex with the intention of eventually putting on a condom or practising withdrawal which they then fail to do bears out how men can so easily end up in situations where they fail to act responsibly, apparently against their better judgement or nature.

3.1.4 Safe pattern: Sexually active no risk-takers who are always responsible

Some men stretched the definition of procreative responsibility to include the requirement to always use a condom, even in situations where the woman says it is 'safe', such as when she is on the pill. While some men did have a concern about catching sexually transmitted diseases, for most of these men the 'no exceptions' rule to condom use was being advocated to prevent pregnancies and not necessarily to protect sexual health.

A small number of men (six out of the sample of 45) reported that they 'always, always,' used a condom and had never had unprotected sex.

Actually, I've always used a condom, yeah. Always, always ... A lot of girls today seem this thing of, 'Well, it's okay because I'm on the pill', like. Fuck's sake! I mean, maybe I was a really careful kid, I don't know; maybe I was over cautious but, no, in my eyes, no way man! No, I was always - I always wore a condom, yeah.

(29-year-old single businessman)

From the perspective of developing policy aimed at preventing unplanned pregnancies, the ideal man, so to speak, is one who adopts what we call a 'safe pattern': where sexual risks are never taken and the man is committed to never doing so. This pattern is not, however, the norm; instead, this study suggests it is the norm for men to take sexual risks from their first experiences of sex and to develop sexually responsible behaviour along the way, albeit at different speeds. Again, given how we sought out men with experiences of unplanned and crisis pregnancies we cannot say statistically how common such safe men are or how typical of all Irish men's experiences this pattern is. However, the fact that such a high number of pregnancy scares were experienced by the men in this study (not just the men who reported crisis pregnancies) – occurring in 39 of the 45 cases, with a suspicion that they occurred in three others also – speaks volumes for the scale of risk-taking that goes on in some men's sexual lives.

While some men stay fixed in the pattern of sexual practice they have adopted by adulthood, men can move around these patterns in a variety of directions. An example of how impulsive men can become steady is a 28-year-old-professional who had his first experience of sexual intercourse at 19 and then had sex regularly, in a protected, responsible way. An unplanned pregnancy that was a result of impulsive risk-taking - having sex without a condom - ended in his girlfriend having an abortion. He has used the abortion as a turning-point and now practises the safe pattern: "Even if somebody says they're on the pill, I'm like 'That's great' but in brackets, 'I don't give a shit, I'm wearing a condom,' like, that's, you know - I think that's good."

Having assessed the evidence from this study and the dangers and problems that arise when men begin to move even a small bit away from an absolute definition of condom use which says they must 'always, always' be worn, we propose that the operational definition of responsible sexual practice for men that is adopted in policy and practice is one which advocates that condoms must *always* be used. It might seem that in an age of increased awareness of STDs, HIV, AIDS and pregnancy risk it is obvious that constant condom use is what is required. But the crucial point, as we will show in much greater detail in the next chapter, is that it wasn't obvious at all to many of the men in this study, and to make an impact policy and practice needs to begin to address these issues from men's starting-points.

It could be argued that promoting abstinence would be the safest policy and practice of all. But again, in terms of starting from where men are at, our findings suggest that for the vast majority of men abstaining from sex is not an option, given the centrality that active heterosexuality has to men's identities today. The challenge, then, is to find ways of ensuring men are fully responsible in the knowledge that, whatever one may think about it, they are going to be sexually active from a relatively young age – before, during, and after marriage.

The key implication for policy and practice is that the operational definition of responsible sexual practice for men that needs to be adopted is an absolute 'no exceptions' rule in relation to condom use. The aim should be that all boys and men are given information and support to promote safe sexual behaviours from the earliest age possible.

3.2 Conclusions and recommendations for policy and practice

This chapter has identified a number of pathways that men take on entering adulthood in the expression of their (hetero)sexuality. The data suggests that men's sexual and contraceptive practices can be categorised into four types, or expressions, of masculinity:

- *Hedonistic pattern*: Chronically irresponsible, narcissistic pleasure-seekers.
- *Steady pattern*: Irregular sex and limited risk-takers who are essentially responsible.
- *Impulsive pattern*: Sexually active, generally responsible, but occasional risk-taking.
- *Safe pattern*: Sexually active no risk-takers who are always responsible.

In summary, six men in the study (N=45) could be described as having *always* practised procreative responsibility, yet even here three of these men experienced a pregnancy scare, where contraception failed – the condom burst. Another six men fitted the hedonistic pattern and had histories of being chronically irresponsible. The majority of men in the study (33) were generally responsible, being either very 'steady' or taking occasional impulsive risks, but also learning from their experiences, such as pregnancy scares.

The key challenge is to both prevent the hedonistic pattern taking shape and getting men to break it when it does become their sexual pathway of choice. We have shown how the hedonistic pattern is not simply about age and life-course development, but related to other factors which we need to attend to. Chief among these is the persistence throughout the life-course of a pattern of what we called in Chapter 2 'conquest masculinity' and the irresponsible contraceptive and procreative practices associated with it. In one respect, men who embody this pattern are egocentric, haven't grown up and remain stuck in a self-absorbed, narcissistic world-view. They are maintained in this, however, by the lack of good quality information and mentoring concerning responsible sexual practice that characterised their late-adolescence and early adult lives. Thus the pattern of irresponsibility and relative ignorance of procreative issues is established early on, and the men demonstrate little interest in or capacity to learn or take advantage of the 'turning-points' which promote the acquisition of responsible sexual and procreative practices - and which we discuss at length in the next chapter.

The majority of men in this study had had at least one pregnancy scare in their lives. The data suggests that most men were able to use subsequent turning-points to learn about sex and their sexuality and develop a more disciplined, responsible sexual and contraceptive practice. A defining feature of the level of impact of pregnancy scares surrounds the extent to which the scare actually comes to be internalised within the man, in the literal sense of causing fear or increased anxiety within him. The more

fleeting the scare in the sense of it being outside of a significant relationship the less long-term effects it had on men's developing procreative responsibility.

Identification of the high-risk men who embody the hedonistic pattern through the life-course is really only possible retrospectively, that is once the pattern has been established (and considerable damage invariably done). This makes it imperative that *all* boys and young men are given good quality information about sex and relationships in a post-traditional context and proactively challenged and supported to be responsible in their sexual and contraceptive practices.

While some men stay fixed in the pattern of sexual practice they have adopted by adulthood, men can move around these patterns in a variety of directions. Steady men become impulsive; some hedonistic men become 'steadier', and so on. The ideal trajectory so far as preventing crisis pregnancies is to move men as quickly as possible to the safe pattern.

- We recommend that further research should be carried out into the hedonistic pattern, its formation and ways of moving men away from it into the safe pattern.

4.0 The meanings and values that heterosexual Irish men attach to sex and sexuality: Men's contraceptive practices

This chapter examines further the meanings and values that Irish men of different ages attach to sex and sexuality by focusing in detail on men's contraceptive practices. While we have covered this issue to some degree in the foregoing chapters, the following discussion gives it systematic attention. The chapter focuses in particular on condom use, not least because it dominated the sample of men's experience of contraceptive practice, and also because, as we argued in the last chapter, we regard it as needing to be central to policy and practice initiatives. In particular, the chapter seeks to learn from men's experiences by exploring the key processes and turning points that make a difference in whether men adopt a 'safe' pattern of sexual practice and become procreatively responsible.

4.1 Men's attitudes to condoms and barriers to condom use

Men's actual contraceptive use was influenced by a range of situational factors. Even most of those who had a well developed sense of the dangers of sexual risk-taking and a principled commitment to behaving responsibly took risks due to situations that influenced their behaviour. One of the most important factors inhibiting condom use for some of the older men was their availability. The narratives of the men in their thirties are particularly significant here: their teenage years coincided with the wider availability of condoms in Ireland, and some told of their struggles to get their hands on them in what one called "celibate Ireland". Thus, when news hit 1980s Ireland that a music store in Dublin was going to begin to sell condoms, it filled young men full of what one called "excitement":

Trying to get condoms in [Irish town] was like trying to get cocaine, I think: very, very difficult. That was actually a big issue: trying to get condoms was a big issue. I discovered if you went up to Dublin to the Virgin, the Virgin Megastore, you could get condoms there, yeah. So, I was working as well during the summer, the summer jobs, mostly to pay for condoms and it [the relationship] became serious enough, like. So I worked a lot that summer because the train was really quite expensive to go up and down on the train ... for the sake of getting, obviously you'd buy a big box of them then, and it was, it was okay in the context of going upstairs in the Virgin Megastore; it was pretty all right, but having said that I'd always wait for a male to serve rather than a female. I might be holding a record in my hand as well over the, you know, just, 'Can I have one Clash album and forty condoms, please.'

[34-year-old rural man]

If condoms are to be at the heart of all attempts to develop safe, responsible contraceptive practices by men, the priority needs to be to ensure that condoms are widely available to men. Yet significantly, even given the recent shifts in sexual attitudes and behaviours already identified in this report, together with the greater availability of condoms in Ireland, men of all ages spoke of their reluctance and outright avoidance of running the risk of being caught - not having sex - but buying condoms. This has everything to do with their attitudes to being seen to be condom users rather than their availability.

I never went into a chemist or nothing, just out of the machines ... too far away to go to the shop. I couldn't see myself going into a shop, I never could. I have often went in to get pregnancy tests for the girlfriend. I went in no bother, like, grand. I just wouldn't go in and buy condoms, and she won't go in either. I don't know, it is odd that way, I think actually when she had the child that, it is only when you have a child you realise that it is all a bit silly, it's like when you were younger and weren't wanting to go in and buy condoms. In all fairness you are a young fella. I would rather go into a toilet and buy them than go to a shop.

(23-year-old unplanned father of a three year old)

A small number of men commented on the high cost of condoms, which made buying them a struggle. The economics of responsible sexual behaviour need to be taken fully into account, most obviously with respect to providing support for those in poverty. A few men were very appreciative of the more recent opportunities to buy condoms from a dispenser in pub toilets - notwithstanding the stories they recounted about how they lost their last few Euro to a broken machine. One man remembered dropping his last coin and watching it roll under the door of a toilet cubicle; he ran out of the toilets rather than ask for the coin back, a reaction again governed by embarrassment.

4.1.1 Condoms interrupt sexual pleasure

Many of the men overcame their embarrassment and went ahead and purchased condoms, even from shops. Not surprisingly, these men tended to be the most sexually safe and responsible in the sample. Embarrassment at condom purchase was not the only factor inhibiting their use. A number of the men disliked condoms because they interfered with their sexual pleasure.

When you have something on it feels, you don't get the full feeling of it; it feels cocooned; it feels - what would I say - eh, if my penis could talk I'm sure it would say it's claustrophobic.

(20-year-old skilled labourer, girlfriend unplanned pregnant)

There was also the difficulty of sustaining an erection after putting on a condom and the man having to learn how to incorporate this 'interruption' into his sex life:

I just, I don't know is it a mental block, or whatever, but there's a lot of times when I end up putting a condom on but I end up losing my erection, and I just don't like that. Or you could end up starting off having sex without even a condom and then coming out putting the condom on and going back down again.

(28-year-old single man, unplanned father)

In such situations some men had come to realise that interrupting love-making to provide for condom use required taking time with women partners to secure their help in his regaining an erection. This requires a capacity for open dialogue with their partners about sex and their vulnerabilities that our findings suggest men find very difficult. This

reluctance to being open about such insecurities (bringing still more embarrassment) is a powerful disincentive to sustained condom use.

On the positive side, condoms helped at least one man in the sample by easing the physical pain for him in having sex: a combination of having been quite recently circumcised, together with a deep rooted fear of causing a pregnancy, made the physical act of sex difficult and painful for him when he did not use condoms.

4.1.2 *Condoms can't be trusted*

A further barrier to condom use was the issue of whether condoms could be trusted. Men who claimed that their sexual partners had become unplanned pregnant when a condom burst were vocal in expressing their doubts about the reliability of condoms. Worryingly perhaps, none of the men who had not yet been responsible for an unplanned pregnancy raised this as a risk. A 'condoms are suspect' perspective led, in some cases, to a fatalistic approach towards procreative responsibility: a 'what is meant to be will be' attitude:

I would have been strong on condoms up until about three or four years ago; I used a condom when our son was born and the condom burst, and it's kind of since then that I just kind of decided that maybe they're not actually worth it. That could be it now, and I'm only just after thinking of that.

(28-year-old unplanned father, separated and sharing parenting)

Given that this man represented himself as extremely sexually active, with multiple partners, the dangers of such fatalistic attitudes should be obvious. The man himself did not seem to recognise the risk he was running, despite already having an unplanned child.

4.1.3 *The influence of alcohol*

A crucial situational factor concerned the influence of alcohol or other drugs. Even men who prided themselves on being responsible took more sexual risks when they had drunk too much:

I suppose I always wore condoms. There was a reason where I didn't and Jesus, there was an awful time had over it. Even though she assured me she was on the pill, I didn't know her well enough, I suppose. I saw this girl for maybe two months. I have to tell you the biggest problem with it all for me is when drink is involved, and I know it goes back to when you used to be told that you get promiscuous with drink and all that. It is very true, and I suppose one way of cutting down on it all, if you could control the drink, because it is a shocker, you know, you really do things that you, that you regret.

(29-year-old single man)

Many of the men regarded themselves as responding to their (uncontrollable) sex drive, with drink fuelling their passionate sexual needs and determination to enjoy sex, without the bother of breaking off to put on a condom:

I tell you myself, I would say myself there is a few discrepancies in the sexual relationships that I had, where there you would be, hormones and the likes, where you wouldn't use one [a condom], and obviously you would have yourself a few scares and whatever. It was basically just sex drive and testosterone, passion - most of them times I would have been under the influence of alcohol. I would be a very placid person when I am sober; I would be very set in my ways; I would know what I want and I would know what I shouldn't do; I would be defined by the morals that I have, but when it comes to drinking, you just loosen up and things go wrong. Well, I wouldn't say that things go wrong, but you do things that you normally wouldn't do and you would have sex where you wouldn't wear condoms where normally you would be 100% where you would wear condoms, you know; or the situations would arise where you are there and you are ready and the condoms are over in a drawer and you are entangled...

[20 year old, who became an unplanned father two years previously]

This illustrates well the tendency that came through in the study for men to use condoms in a conditional way by initially penetrating the woman unprotected and only putting on a condom at an advanced point of arousal, just prior to ejaculation. The consequences of men failing to 'disentangle' themselves from the women in time to ensure proper protection were often huge - as, for example, the same 20-year-old man just quoted was to discover when he got his girlfriend pregnant when drunk at a birthday party. We recommend that policy is framed in a manner that underlines the importance of condom use beginning before actual sexual contact has been initiated.

4.1.4 Beyond condoms: withdrawal as a form of contraception

Some of the men spoke of using withdrawal from the woman before ejaculation as a method of contraception - the so-called 'withdrawal method'. Again, these tended to be the men who took most risks and were least sexually responsible. Those men who said they took full responsibility to manage their own contraceptive practice did not make reference to the withdrawal method because they always used condoms. For those men who practised withdrawal the commitment with which they withdrew was in part dependent on the clarity or forcefulness of the woman's direction to do so.

You were just trying your best not to get her pregnant. Your mind would be more at ease if you did use the withdrawal method because at least then you had some form of contraception. It takes concentration. You would be at it and you would be saying, 'Right, I am going to pull out,' and she would be saying 'Right, right,' and you would then ... and sometimes it was left in and I was like, 'Oh, sorry about that.' And they were the worrying times, but most of the time I was fine.

[27-year-old married father]

As we showed in the last chapter, some of the men who spoke of using the withdrawal method also disclosed ambiguity about the level of safety it actually provided, yet they were in general happy to use it as a method from time to time. The risks this brought were compounded by the men's lack of understanding about women's bodies in terms of knowledge about their menstrual cycle and ovulation.

4.1.5 Beyond condoms: the morning-after pill as a form of contraception

Some men, particularly those in the younger age group who lived a very sexually active lifestyle, partook in unsafe, risky sex knowing that they could access the morning-after pill as a form of contraceptive. The context of the relationship strongly influenced men's involvement in getting the morning-after pill. If the men were in a meaningful relationship with the woman they more often shared the responsibility of going to get the morning-after pill and the cost of paying for it. However, when the sex took place outside of a relationship, on a (drunken) one-night stand for instance, there was strong evidence that the men simply left the responsibility of managing the risk to the woman; as one 22-year-old man put it, "If the girl didn't say it to me then I wouldn't worry. She could have gone herself and got the pill herself."

Overall, a small number of men referred to experiences of the morning-after pill, in relation to which three key issues arose:

- Men were confused by the name of the morning-after pill to the extent that they misunderstood the timing of when it can effectively be taken.
- Men expressed ambiguity about what the morning-after pill actually did, with some confusing it with an abortion pill, which led them not to look for it.
- Men felt inhibited from considering the morning-after pill because of its cost.

4.1.6 Deferring responsibility for safe sex to the woman

In discussions about failing to use a condom a key pattern to emerge was the tendency for many men to keep going unless the woman told him to stop. This points at some deeper level not merely to men's sexual abandon or not wanting to interrupt love-making, but rather to men's deferring of difficult decisions and procreative responsibility to the woman. Some men assumed the woman was on the pill; some believed that it was her responsibility to deal with the outcome whether or not she was on the pill, leaving him with no responsibility to check. Others found it hard to articulate why they took such risks. The narratives suggest that there is an element of men seeming to hand over their power (as well as responsibility) to women, assuming those women know what they are doing. Men's avoidance of even a conversation about procreative responsibility demonstrates an almost child-like level of irresponsibility: an expectation of being emotionally held and cared for, which seems to take over some men at these moments of deepest intimacy. An interesting paradox is glimpsed here: while men are generally powerfully proactive in wanting and seeking sex, they hand over their power to women in the process - and with it responsibility: what some men appear to desire is power without responsibility.

4.2 Learning from experience: Turning points in becoming responsible

As we have already seen in Chapter 3, a close second to the ideal of men adopting the 'safe pattern' of consistent condom use is for men who engage in risky behaviours to change and subsequently develop a responsible pattern of behaviour. As we have shown, for a variety of reasons it is the norm for men to take risks at the outset of becoming sexually active. The critical issues are how receptive they are to learning and what makes a difference to that process. Men can and do learn from experience, some more quickly than others, and we shall now outline what the data shows in relation to the key turning-points that influence the development of men's safe sexual practices.

4.2.1 *The man's sudden awareness of his capacity to impregnate a woman*

A potent turning-point that provoked such learning was a man's sex-induced sudden awareness of his capacity to make a woman pregnant. Men who experienced such an awareness claimed to have become faithful condom users after their first experiences of sexual intercourse, often feeling lucky not to have got the woman pregnant.

I suppose I was lucky at the beginning. I mean, we did use condoms later on, you know. It wasn't that we were being unsafe all the time, but I just hadn't got my head around all that, I mean, as far as I was concerned, I wanted sex. I can only say I learned from my mistakes...

[21-year-old, unplanned father.]

The fastest learners were those men who disclosed how, after the first time having sex without a condom, they were so relieved not to have been caught they promised themselves that they would never do so again. Simon, a 25-year-old interviewee, exemplifies this pattern. From a middle-class background and an aspiring professional, the message he had learned about sex from his mother was to 'respect girls'.

So I suppose it was quite strange, you know, my first sexual experience ... the big thing in that, that first ever, it was without a condom, you know, which was, like, so stupid now looking back on it. So I suppose in the weeks to follow, because I didn't really know her, like, you know what I mean, I kind of know who she is but, I mean, I didn't really know, kind of, too much about her and I was thinking that was so stupid, like, you know, but in the weeks to follow things seemed to be okay so...

[Did you come inside her?]

Ehh, yeah, after ages, like, it was kind of, it was kind of like a big effort; like, it took hours because I didn't know what I was really doing, but, I mean, that bit without the condom, now, looking back on it, that, that never happened to me ever again: I never, you know, I never did that again.

[But what about at the time, did you know, did you think at the time you were taking a risk?]

No, I didn't know at that point. I didn't really think about it.

[25-year-old single professional]

Some men, it seems, have to have actual bodily experience of full sexual intercourse with ejaculation inside the woman in order to understand their capacity to make a woman pregnant. There occurs a literal embodiment of the need for responsible behaviour. The shock of recognition leads some into a dramatic commitment to adopting an absolute 'no exceptions' rule to condom use and procreative responsibility, whether the woman says she is on the pill or not.

The research findings suggest the need to work with boys and men in ways that get them in touch with their bodies and allow them to experience their true capacity to make women pregnant, without having to take the risk of doing so. Through the research process we developed the use of a number of key questions, which we timed to deepen the level of conversation and to (re)connect the men with the immediacy of their actions and issues of responsibility within the story they told about themselves. The conversation above demonstrates an occasion where we tried to tactically jolt the interview into a more authentic discussion rather than just a heady exploration of the interviewee's ideas on sex in general. Bold questions such as '*Did you come inside her?*' were strategically used to create an openness in the conversation and to model our ease with discussing sexual behaviour, while also immediately challenging the men to move from their heads (down) into their bodies. The deepening of the narratives that followed showed that sex is not just a heady pursuit but something played out in the arena of the body. Questions such as these clarify difference and meaning while respecting the interviewee's responses, but they also punctuate a moment when the interview itself became embodied. We recommend that ways of engaging boys and men about sex and procreative responsibility need to adopt strategies which directly name their capacity to make a woman pregnant through actual bodily experience of full sexual intercourse with ejaculation inside the woman.

4.2.2 *Pregnancy scares as turning points*

As we have shown, most men in the study had at least one pregnancy scare at some point in their present or past sexual relationships. Not surprisingly, then, many men spoke of how they occasionally took sexual risks, but that it took an actual pregnancy scare - that is a suspected pregnancy with a woman telling them her period was late - before they realised how dangerous their behaviour had been.

I had a scare - that was the worst thing. I never thought that I would fear anything. We hadn't used a condom and her periods were late by two or three weeks, or something, and she told me that she had never ever been late, so I thought, 'Here I am now.' I used to sit there and I would be saying to myself, 'You're stupid for getting yourself in this situation, you know all the consequences but still get yourself in trouble.'

(20-year-old cohabiting unplanned father)

One response to the scare - albeit by a minority of the men (3) - was for a couple to cease having sex altogether and to wait until they were married before resuming sexual intercourse. For some men it took more than one scare for them to change their behaviour to become more/fully responsible, while others, as we discuss in subsequent chapters, *never* did. The fact that as many as 30 of the men in the sample experienced an unplanned pregnancy, 19 of whom went on to define it as a 'crisis', illustrates the gap that

exists between pregnancy scares, crisis pregnancies and men's capacity to change their behaviour under the current social conditions, where so few supports are available to them to enable them to process and learn from the full implications of pregnancy scares.

A defining feature of the level of impact of pregnancy scares surrounds the extent to which the scare actually came to be internalised within the man, in the literal sense of causing fear or increased anxiety within him. The more fleeting the scare - in the sense of it being outside of a significant relationship - the fewer long-term effects it had on men's developing procreative responsibility.

Unless attempts are made to engage directly with boys and men about unplanned fatherhood and potential or real pregnancy scares, then the possibility for the scare to become a turning point in the man's life - where he adopts a more disciplined contraceptive practice - will be lost. For some men the shock of the scare is enough to make them become safer, but for others outside intervention is needed; this is currently not available to most men. This again leads us back to a core recommendation of this study concerning the need to develop educational and social intervention programmes that engage directly with boys and men and challenge and support them to reflect on the possible outcomes of unprotected sexual behaviour and the implications of the various decisions they would have to make if (or when) presented with the prospect of unplanned fatherhood.

Ironically, a minority of men felt that they overplayed the impact of such scares in how they handled relationships. An experience of a pregnancy scare could lead to a desire to check up on the woman to make sure she wasn't pregnant. Some were conscious not to split up with a girlfriend until after she had her period. While such behaviour could be seen as a healthy expression of procreative responsibility by men, if carried to an obsessive level it may cause difficulties in a relationship. One man explained how his heightened fear of an unplanned pregnancy meant that he kept note of his girlfriends' periods and phoned them when they were due - something that caused him to lose a number of girlfriends.

4.2.3 Learning from unplanned pregnancies

For some men it took the reality of an unplanned pregnancy to actually cause them to focus for the first time on their procreative responsibilities. They did not learn enough from their first or even subsequent pregnancy scares to become contraceptively responsible. Significantly, while some men whose partners had become unplanned pregnant spoke of being caught on the first occasion they took a risk, the majority had had at least one previous pregnancy scare. We shall discuss these issues only briefly here as we cover them in detail in the chapters devoted to crisis pregnancy.

In one sense, promoting learning from an unplanned pregnancy may seem to be too late, like locking the proverbial stable door after the horse has bolted. However, given the infinite capacity there is for men to make women pregnant, it is never too late - as the data shows. This is exemplified by one man in the sample who had experienced three crisis pregnancies with two different women; one of these ended in a miscarriage while the other two ended in abortions. While the man spoke of the emotional hurt he experienced through his sense of powerlessness at the time of the abortions, he never developed a responsible contraceptive practice. He had never discussed his sexuality, sexual behaviour, contraception or the abortions with anyone prior to the research

interview. We include his case study in some detail in Chapter 6, as it exemplifies the dangers of men not learning from experience, where they are not offered an opportunity to critically reflect on their procreative identity in a responsible and supported manner.

4.3 Why men become procreatively responsible

Finally, the data suggests a number of further reasons why men become responsible for contraception and avoiding pregnancies.

4.3.1 A fear of letting down the family and the self

As we showed in Chapter 2, fear - the fear of letting down the community, shaming the family's reputation, and so on - was regarded by the older men in the study as a key contraceptive in traditional Ireland. Fear remains a factor in post-traditional men's narratives:

It would have killed my mother at the time, if I had caused that ... It would have killed my mother if I'd impregnated [a woman]. No, but it would have broken her heart.

(31-year-old bank manager)

Yet, while issues of maintaining the good name of the family are still relevant, the locus of fear seems to have shifted from the community to the self and finds expression in the implications of unplanned pregnancies for the life plans of men.

4.3.2 A fear of being "trapped" by a woman who was an unscrupulous sexual predator

One expression of this fear for the self was a concern about being entrapped by predatory women:

Oh God! I always used, always used [condoms]. You know yourself, you are taught in school and you hear about all this AIDS thing and you don't know, you don't know what's going on, so all the time I have them ... You could be out in the pub and you meet this girl, and she could turn around and say, "Oh I am on the pill." I say, 'I don't care - still going to get condoms. I don't know - you could be lying to me, I just met you tonight.' There are some psycho women out there, they say they are on the pill, and you go on and ride them, and then nine months down the line you are with someone and you don't want to be with them, 'cause you were only with her for one night, and, sure, that don't work, you know.

(22-year-old shop assistant)

Most men who developed a 'safe' pattern from first/early sexual experiences were less melodramatic and judgemental in their view of women and were much more driven by a concern to protect themselves from the responsibilities of parenthood before they were ready, emotionally and practically.

4.3.3 A fear of becoming a father much sooner than they wished, and the implications this would have for their career ambitions and the creation of a 'respectable' life.

A key incentive in men's development of contraceptive responsibility surrounded the extent of inclusion they experienced in society, in a dedicated career, a distinct and meaningful life path. This came out most clearly in the narratives of a sub-group of professional and highly qualified men - bank managers, doctors, solicitors - who we actively sought to include in the sample. For professional men, the risk, indeed dread, of an unplanned pregnancy was something that they were constantly aware of - before, during and after sexual intercourse. For them an unplanned pregnancy represented a huge crisis because it had the potential to throw them off their chosen life path. They had attended private fee-paying boarding schools, played sports and gone to university. All aspects of these men's lives had been chosen and planned, both by themselves and, especially, by their parents, with the goal of achieving a professional career and a respectable, affluent lifestyle. Their narratives were dominated by a view of how hard they had worked for their position and how nothing was going to throw them off course.

My biggest worry, my biggest fear, was that she'd be pregnant with my kid. Then all of a sudden you'd be trapped into this sort of thing, and all my ambitions about being, you know, in university and [legal training] you know, living the life, like, would be finished. If you want to get out and enjoy sex and all that, fair enough, but you have to, you know, I would say that I have to take precautions because one, one mistake, you know, one time the odds go against you and then, and, you know, then that's the end of me - that's a waste of my time going to university. You know, it's hard enough to start at the [professional association] at the best of times, so having to start at the [professional association] with a kid and a significant other, or partner, whatever, or even just paying maintenance - that would be, you know, financially would be one, but secondly, the stigma that certainly that I had a kid, with such-and-such, you know that sort of thing. I would, you know, I'd support woman who come on the TV and advocates for this pro-choice position, because at the end of the day it is, it comes to you at some point. Okay they get into all this thing - when does the life start and, you know, all that kind of thing. For me, it was just like, 'Well, that might be the start of a life, but my life is over, like.'

(25-year-old single professional)

As teenagers, these young men were no less embedded in a culture of conquest masculinity. Yet for them girlfriends and dating had to coexist with study, sports and being with the lads. Conquest masculinity had to rub shoulders with an acquisitive, competitive, achievement-oriented self. This meant that for some girls were a distraction, even a risk. At the extremes it appeared to bring an almost ascetic younger lifestyle where safety was to be had in scholarly achievement and fulfilling career aspirations. In college these men tried to pursue longer-term relationships, avoiding one-night stands, especially with women you (or your parents) might have nothing in common with. The *general* pattern was for this group of men to take responsibility for preventing pregnancy by wearing a condom; as one professional put it: "It did not matter what type of contraception the woman said she was on, I always put on my own condoms - it's just too much of a risk."

These professional men also spoke about the way they wanted to become 'good at sex.' They certainly did not have a monopoly on this in our sample, as some men from all social backgrounds spoke of the importance to them of giving as well as receiving sexual pleasure. For these high achievers who had worked hard and succeeded at everything else in life, sex was something they wanted to be able to do well by the time they were to marry the woman of their dreams - a woman that would have a lot in common with them, especially their social status. Having spent their teenage years focusing on their studies, these men in some way doubted themselves vis-à-vis their imagined sense of inadequacy compared to other men, namely, wild/sexually adventurous men. One professional spoke about how he went along to a brothel in Eastern Europe in order to develop his sexual abilities, while another professional man related how he slept with a 'girl from the wrong side of town' just to get the practice. Another man spoke of his joy at learning the skills of 'oral sex' so that he could surprise women with his sexual prowess on early dates. Becoming good at sex for these men was, in a sense, a lifestyle choice: part of the package deal where they were actively constructing a self-narrative that was highly educated, professional, responsible for self and good at sex.

But it didn't always work out like that. For example, one very upwardly mobile man in his mid-twenties spoke evocatively of having full penetrative sexual intercourse without any protection on a one-night stand with a working class young woman from his home town and spending many subsequent days feeling terrified that she was pregnant. It turned out that she wasn't, but he was adamant that if she had been he'd have insisted on an abortion and done anything to achieve it. The fact that he professes an anti-abortion value-base demonstrates the gap between theory and practice and how such stances can be manipulated to suit particular ends. This typified the general pattern: such men tended to be procreatively aware and responsible yet also adamant that if a girlfriend became pregnant they would really have to put her under pressure to have an abortion - which suggests a significant level of procreative irresponsibility in that the woman's needs and wants were simply not on the agenda.

The corollary of the manner in which privilege and ambition bred a disciplined sexual and contraceptive practice is that inequality and disadvantage frames some working-class young men's world-views in a manner which seems to promote more risk-taking. We are very concerned not to be seen to be setting up a crude dichotomy here between caricatures of responsible middle-class men and the irresponsible working-classes. There were clear exceptions to these patterns in both groups. But important social-class differences are apparent in the study in how some young socially excluded working class men adopted an opportunistic view of unplanned pregnancy and the possibility of fatherhood, which couldn't have contrasted more with the professional men's life-planning. For some of the youngest and most marginalised men in the sample, getting a woman pregnant and the possibility of becoming a father (even a non-resident one) offered these men the first real opportunity to succeed in life. As we show in the next chapter, young fatherhood - even when unplanned - provides an opportunity for social inclusion for some disadvantaged men, even if their best intentions do not always work out so positively.

4.4 Conclusions and implications for policy and practice

This chapter has explored the complex relationship between men's procreative consciousness and (ir)responsible sexual and contraceptive behaviour. Various ways have been examined in which men develop consciousness of their procreative capacity, whether it be in a fleeting situational moment of sexual desire or in a more sustained awareness that sex can and does create babies. While condoms are now widely available, the findings revealed a powerful consensus among men concerning the embarrassment they experience being seen to buy condoms in public places. The first priority, then, needs to be to ensure that condoms are widely available to men. The economics of safe contraceptive practice need to be taken fully into account, most obviously with respect to providing support for those in poverty.

We recommend that:

- Condoms should be made widely available free of charge, preferably from dispensing machines.
- Policy is framed in a manner that underlines the importance of condom use beginning before actual sexual contact has been initiated.
- Because some men don't change their sexual risk-taking, even following a pregnancy scare or unplanned pregnancy, attempts should be made to directly engage with boys and men about potential or real pregnancy scares and unplanned fatherhood, so that the possibility for the scare to become a turning point in the man's life where he adopts a more disciplined contraceptive practice can be advanced.
- Preventative educational and social programmes need to be developed that engage directly with younger men by challenging and supporting them to reflect on the possible outcomes of unprotected sexual behaviour and the implications of the various decisions they would have to make if (or when) presented with the prospect of unplanned fatherhood.

5.0 Managing a crisis pregnancy: Decisions where the pregnancy went to full term

This chapter explores the self-perceived role of Irish men in crisis pregnancy. It examines how men respond to news of an unplanned pregnancy and the factors that influence men's responses to and management of the situation. We decided to focus on interviewing men who had been through a crisis, rather than men who were currently in a crisis. We hoped that such a distinction would allow the men to reflect on the time and the factors that influenced the crisis, rather than have the interview itself run the risk of becoming a therapy session. It was not that we felt unprepared to manage the boundaries between research and therapy, but more that we felt the most useful data would be that where the men had a more complete story to tell of their experience. We found that many men were discussing the crisis for the first time in any depth with an outside person, and this was especially true for those with abortion experience.

We did not take the notion of 'crisis' in relation to pregnancy as a pre-determined given but report here on the meanings the term had for the men. When, for instance, is an unplanned pregnancy a crisis? The findings show that not all such pregnancies are viewed as a crisis in the sense of being experienced as a disaster. In fact, while some men did have such a negative perception, others viewed unplanned pregnancies in a positive light: as an opportunity. This chapter focuses in depth on crisis pregnancies where the pregnancy went to full term and the men became fathers. It draws out men's self-perceived roles in such decision-making and their outcomes, while Chapter 6 deals with crisis pregnancies that ended in abortions.

5.1 A 'crisis'? The meanings of unplanned and crisis pregnancies for men

Of the 45 men interviewed, 30 men had experienced unplanned pregnancies. Of these 30 men, 19 men had experienced 22 pregnancies which they defined as *crisis* pregnancies. Of these 22 crisis pregnancies experienced by 19 men, 10 were brought to full term. Six of these 10 births occurred to couples who chose to stay together, some because they were in love and planned to be together long-term anyway; others because the pregnancy led them to decide to give it a try, as one man put it, "for the sake of the baby." Meanwhile, another 4 couples chose to keep the baby but not to be lovers or to live together as a couple and tried to co-ordinate some form of shared parenting of the new-born baby. Two crisis pregnancies ended in a miscarriage. Another 8 men experienced 10 abortions (i.e. 1 man experienced 2 abortions and one other 2 abortions and a miscarriage); we focus on these men in detail in the next chapter.

A crucial finding is that not all unplanned pregnancies are experienced as a crisis. Some unplanned pregnancies become wanted pregnancies. Eleven of the men had such experiences. For some men this happens almost as soon as the unplanned pregnancy is confirmed. For others it can take much longer for the pregnancy to become wanted and, at the extremes, can involve planning for and subsequently pulling back from the brink of an abortion. In the case of three men who were actually married the unplanned nature of the conception related to their 'openness' to conceive within marriage while not using any form of contraception. These men spoke of their relationship as being a container within which sex, love and the constant possibility of conceiving and bearing children was

all part of being married. Unplanned pregnancies in this context were, then, broadly welcomed and in no sense regarded as a crisis.

A more complex picture emerges for those unplanned pregnancies that occurred in long-term committed relationships but where the couple had no prior expressed wish to have (another) baby, or perhaps did not want one. Two married men spoke of how their first child was planned, while the later children were not, but these eventually became wanted pregnancies.

A further pattern involved a sub-sample of younger marginal working-class men for whom unplanned fatherhood was experienced as an *opportunity* to have a meaningful life and role, in the context of social exclusion through failures in education, employment and so on. For middle-class men unplanned pregnancies were more likely to be a crisis because of the burden of providing for a child threatened to prevent them from fulfilling their professional education, career ambitions and life plans.

For some men, particularly those we discuss as fitting the hedonistic pattern (see section 3.1.1), an unplanned pregnancy was not a crisis for them as they simply didn't know or care if the woman had become pregnant, and if she had become pregnant they didn't care how she managed.

For those men who wished to take some responsibility, an unplanned and unwanted pregnancy was a crisis.

For a minority of the men the 'crisis' aspect of the pregnancy was due to a miscarriage occurring.

We actually had a miscarriage over the last couple weeks. Well, it was very early on. Thankfully it was very early on, so we didn't have to go through the whole cycle, the whole term, and there was no physical damage done to [name of wife], but we had all the tests and the tests were positive, and she was a couple of weeks late and we did about four tests and they were all good. And then she got a bad period and it was kind of very uncomfortable, and then we did another test obviously and there was no baby. So again, we had, it was either faulty tests or, you know, a miscarriage, but anyway, we thought number two was coming and as recently as last weekend number two is not coming. But we'll pick ourselves up and we'll try again, you know.

(31-year-old married father)

A couple of men had made women unplanned pregnant over twenty years ago, that is before the liberalisation of Irish society that we spoke of in Chapter 2. For these unplanned pregnancies during the 1970s and early 1980s, the crisis was heavily shaped by the shame of their families finding out about the women being pregnant outside of wedlock. Their narratives spoke of how the shame was such that parents would reject their children at the very time they needed support most. There was never any suggestion that these men would not stand by and marry their pregnant girlfriend. Their language of "sex before marriage" was quite literally that: they took the risk of having sex with a woman, but only when they were in a committed relationship with a woman

who, if she became pregnant, they would probably marry anyway. As we show later, this did not mean that abortions never occurred in such cases: they did. Meanwhile, some other men from this era displayed little sense of procreative responsibility and constantly denied that they probably fathered children, despite girlfriends' insistence that they had.

For a minority of men the perception of crisis in an unplanned pregnancy had little or nothing to do with the impact of the unplanned conception on the woman and child but was more in relation to the man's fears of a backlash from others: of violence, infection by the woman, being ostracised, shamed and so on.

5.2 Managing an unplanned and crisis pregnancy: Decisions to have the baby

In this section we focus on what factors influenced the decisions that were made to proceed with a pregnancy and have the child when an unplanned pregnancy that became a crisis occurred.

The data suggests that when a man learns that he has made a woman pregnant without planning or wanting to do so, the initial response is generally one of confusion, fear and chronic uncertainty. Most of the affected men in the sample went on, to varying degrees, to engage with the woman in resolving the crisis. It was common for the woman, and the man – depending on his degree of involvement – to change their minds often. Abortion would be mentioned or actively considered, as would having the baby.

5.2.1 On not going through with the abortion decision

In two instances an abortion was actually planned, the women travelled to England and decided at the last minute not to go through with it. One of the two men involved experienced intense anxiety and feelings of sickness as the abortion approached and saw himself as having talked his girlfriend out of their initial shared decision to have an abortion. The couple now live together with their six-month-old child.

The other man whose girlfriend didn't go ahead with abortion appeared to have little influence over her decision, which she effectively made herself. They had known each other for three months when she became pregnant. Twenty years of age, Patrick had been highly sexually active since the age of 16, practising what in Chapter 3 we called a hedonistic pattern, characterised by reckless risk-taking. He had a history of pregnancy scares and one confirmed pregnancy which ended in miscarriage, all with different women. With respect to the current pregnancy, he was exuberant about becoming a father when his girlfriend said she wanted to have the baby:

I was over the moon about it, I couldn't believe it! ... I never felt so much pride and so much enjoyment out of being told you're going to be a daddy, because that's going to be a small part of me no matter what happens, it's always going to be a part of me. Like, he can change his name, change his hair, he or she can change their name or hair, they can be gay, they can be whatever, they're always going to be connected to me, whether they like it or not, they're always going to be a part of me.

[20-year-old unskilled labourer, expectant father]

Yet he was equally accepting when his girlfriend decided she did not wish to have the baby, although he felt "sick". He felt some resentment that she had asked him if he was happy with the pregnancy, but never how he felt about the abortion. He borrowed the money to finance the abortion but didn't travel and fully accepted the situation when his girlfriend returned from England not having gone through with it. The birth of the baby was imminent, and while they now co-habited their relationship and future as a co-resident family was regarded by him as uncertain.

5.2.2 *Kept the child and stayed together*

This begins to show how the type and level of involvement the men had in decision-making about how to manage the pregnancy varied considerably, as did the speed at which the decision was made. Five key factors can be identified, which influenced decisions to keep the child:

- The couple, no matter how short the relationship, shared some sense of a future together, or at least enough in common to face having the child and sharing parenthood - be it as a couple or apart.
- The man had a vision of himself as a prospective father.
- The man's willingness to have a flexible approach to creating a family, including being prepared to live apart from the prospective mother and commit to being a (possibly non-resident) father.
- The man's willingness to state his wishes in relation to the pregnancy.
- The couple feeling their own parents and extended families would support them as parents, even if they were dismayed by the crisis pregnancy.

Jack's story of managing an unplanned pregnancy three years previously at the age of 19 exemplifies these key points. He had been going out with his girlfriend for about three months when she became pregnant. She had been on the pill when they met and was due to collect a prescription for it. However, they had been out of town for a weekend away and risked having sex without any form of protection.

I was nineteen at the time, but I'd always fancied her from the minute I'd seen her and I'd imagine worse things than [girlfriend's name] getting pregnant with me, like, so, because I really liked her, like. The two of us got on like a house on fire, I thought she was, I still think she's stunning looking and so it didn't matter to me that much, I wasn't actually that worried, and she even said it. I don't think it sunk in for a good while, I didn't mind then, I wasn't that fazed by it, because I always wanted kids anyway. I would have waited there for her until I was a bit older, say, even twenty-five or twenty-six if I'd planned it, like, but when it was unplanned it didn't, I wasn't that bothered by it.

(22-year-old co-habiting father)

Despite not really knowing each other very well, the unplanned pregnancy brought the couple closer together. Jack regarded his willingness to state his wishes in relation to the pregnancy and the relationship as a key influence in decision-making.

She was thinking it was her responsibility, the girl is kind of always, it's they get left holding the baby anyway if the fellow fucks off, that's where she was kind of worried about that. But, no, and she didn't know me, like, because we'd only been going out for the three months before she got pregnant, like. She didn't know if I was going to fuck off, like, or, you know, leave her, drop this on her, like, and she was just, I didn't know what to do. So we, we spoke about it and I said, 'I'm not going anywhere,' you know, and I'd, I said I wanted her to have it and I'm kind of against abortion anyway. I'm kind of against abortion, and I said I wanted her to have it, she's kind of against it too and she said that she kind of wanted to keep it too but only if I was sure, and I said I was, yeah, and we spoke about it for, about it a whole weekend, I think, and then we decided to we were going to keep it, like, and make a go of it and that, and it was just shortly afterwards, like, that I got the job in town and the two of us then moved in together, we got a flat down here.

(22-year-old co-habiting father)

The willingness of men to state their wishes in relation to the pregnancy was more common where the pregnancy went full-term than in situations where the pregnancies ended in abortions. It seems that some men who were relatively unknown to the women they made pregnant had to actively counter stereotypes of men to whom this happens as feckless, irresponsible and potentially useless fathers who will abandon the woman and her child. Our data shows that, like all stereotypes, there is truth in such perceptions. But the research evidence - albeit from a very small sub-sample of men - also points to how some men behave responsibly, and this needs to become part of public perceptions.

In addition, Jack's parents were basically supportive after he told them, despite his intense fear of rejection: "The hardest thing I ever did was telling them, to tell them that she was pregnant ... I was fucking shaking like a leaf, you know." They had noticed that he had changed over the previous two months and were worried that there "was something majorly wrong", and ended up relieved to hear that it was 'only' an unplanned pregnancy. This typifies how a key feature in whether the pregnancy was brought to full term was the couple's sense that their extended families would be accepting of the unplanned pregnancy and, better still, provide some actual support with child care.

But parental support was not always forthcoming, and in some cases came with anger and conditions. This is a generation of men (and women) having to make their own rules. Couples who decided to keep the baby had to discover their own sense of autonomy and consciously work against and beyond the traditional order, most immediately in how it was embodied by their parents. This was articulated by Simon, a 34-year-old man whose girlfriend became pregnant when he was 27 ("going on 12", by his own account). There was no tradition then of people deciding to move in together in his social circle. The couple seemed to fear parental disapproval, had told no one and spent the first couple of months of the pregnancy "confused". A change happened when "we had decided then after that, like, we're just going to do our own thing; we don't need anybody to tell us what we're gonna do; we're just going to do our own thing." This could be a perilous process and for the last mentioned man "was the most incredible,

frightening experience of my life. ... [Girlfriend's] mother, I thought she was going to tear my head off with her nails, you know. She was just violently fuming." His girlfriend's parents then weighed in with full force of 'persuasion':

[My girlfriend's father] was there as well, and he was just. And you could, basically they both decided, 'Right you have to get married.' So we were, 'No we're not,' you know, but you couldn't say anything. We just took our, we just ate humble pie at that point because I was in shock, to be honest, because I don't think I would have expected them to react like that, and [girlfriend] hadn't either. So we just, the beration [sic] happened over a period of around three hours, or whatever it was, and we went back to [place] afterwards. We just left them sit on it, and we went back to [place]. And the phone then for around two or three weeks was ringing constantly from them, saying, 'What are you going to do? What are you going to do? When are you getting married? When are you getting ...' and I think we both kind of cracked. And I remember for me it was a bit easier because I wasn't the one carrying the baby, but for her [girlfriend's] parents it was the massive, massive thing, I mean this was like to them, it was just the whole family was completely disgraced. And so gradually we got around to the idea that we would get married, to save a lot of hassle. We knew that we loved each other anyway. It wasn't as if that we'd met yesterday, we were together at this point, erm, three-and-a-half years or so, and eh, in some, yeah, I suppose three years, and we said we'd go and do it. Let's go and do it and let's get all this hassle out of the way; let's start a life together and we'll be better off in the long run.

(34-year-old married father)

His own parents accepted the situation, which surprised him – even his elderly father with whom he had never got on. His girlfriend's younger brother subsequently got a girl pregnant, but there was little parental outcry about it, "because we had broken the back of the thing, there was nothing on it." Personal and social change was becoming accepted.

5.2.3 Kept the child and separated: Non-resident fathers

For some other men in this sub-sample being responsible at the time of an unplanned pregnancy was not about trying to make the adult relationship work by planning to be a couple, but where the man actively supported the pregnancy and expressed a clear intention to live as an involved father separately from the mother. For some men demonstrating a willingness to be flexible in the type of 'family' they were prepared to create with the (estranged) mother was an important factor in the decision-making where the pregnancy went full-term.

Mat - 21 at the time of interview - was responsible for an unplanned pregnancy when he was 19, with a woman he was "sort of going with". Their son is now 18 months old and the couple stayed committed to co-parenting, but were struggling in their own relationship. He is living at home with his parents and is pulled between being 'one of the lads' and being a good father, or more so a good partner. He calls into see his son each day when he can, and takes him on Friday nights and for the day on Saturdays. He loves being with his son, who has reached "a great age for playing with."

He had previous pregnancy scares with a range of partners. To his relief, none of these scares ended in pregnancy as "they (previous partners) used to be kind of sleeping around, so it could have been anyone's". But he felt okay that this woman was carrying his child - not that he ever thought of her as someone he would continue to have a relationship with, more that he felt she would be a good enough mother. He "was delighted" to learn she was pregnant and was fulsome in his praise for her as a full-time mother. He was clear that his parenting role was certainly part time in comparison. His own mother's involvement in child care was crucial to his parenting.

She's [ex-girlfriend] brilliant with him, and her mother is absolutely brilliant as well. I can definitely honestly tell you I'm a part-time. But me girlfriend gets up in the morning for the feed; she puts him to bed ... she's always there. I couldn't knock her for that, like. She's after losing all her friends, like. I still have all my friends. Like, I still get out on Saturday nights 'cause my mother looks after him ... they're brilliant grandparents, brilliant. If I say the child is not going out on a Saturday, they go ballistic: like, they'd nearly cry just to have the child. They thought my life was going to be ruined, like, but thank God not, no it's not.

[What would it be like for you if they weren't there?]

To be honest with you, it would be hell - it would be absolutely hell. Jesus - twenty-one and sitting in on a Saturday night, not being able to go off, like, and do things with the lads or whatever, like.

(21-year-old non-resident father, co-parenting)

The paternal grandmothers were a crucial support to their son's efforts as non-resident fathers. In this study it was always the father who became the non-resident parent. And while we did not interview any of the mothers or their extended families, all of these men recognised that the women carried the majority of the burdens and responsibilities of childcare. Because we did not interview any grandmothers we cannot include their side of the story. But while the men viewed their role as hugely positive, we cannot assume that grandparents/mothers always wanted to play this role or do so without being burdened. In having the key role they perform recognised, grandparents need to be supported - financially as well as socially - by the State and others.

A key struggle for these young unplanned fathers was that they had to confront the possibility of fatherhood while still in the developmental stage where they wanted to be free to enjoy life, out with their peers. This is no less true for young women, who, because they are left to care for the baby, and by the men's own accounts, expect that this will be the case, shows how profoundly based on assumptions about gender these decisions and practices are. As part of the negotiations that led to decisions to see the pregnancy to full term, this sub-sample of men and women concluded that the man would not become a full-time, resident father. It appears that the men managed to convince the woman that they see themselves as having a key role to play, albeit often a more limited one than the mother. Thus for some such men the meaning of procreative responsibility when negotiating a crisis pregnancy did not extend to equal responsibility for parenting. As Mat expresses it:

To be quite honest with you, I didn't want to be a father at the age of twenty-one. That's one thing - if I said it to anyone now that's growing up I'd say to use something. No, I would, because, because I'm not putting down anyone, but not everyone's mother and father are as good as my mother and father, like. There are young people, like, have to look after their child seven nights a week...

And he offers his experience as a lesson to other young sexually active teenagers:

I'll tell you the truth: everything's gone between me and my girlfriend, and that's what'll happen - they'll be like most young parents to lose it, like. You just, you don't want to be stuck with the one person for the rest of your life, do you know that kind of way. Sex - that's what young people are in for, sex. That's what I was in it for anyway. Not with this girl, now, but I'm after learning big time. You're tied down, especially with a child, then, as well.

(21-year-old non-resident father, co-parenting)

5.2.4 Co-parenting in a post-traditional order

In the context of a more mobile society in which increased numbers of young people leave home to attend college, get work and so on, in a number of cases where parents had decided to keep an unplanned baby they had to stay committed to negotiating co-parenting and access for non-resident fathers over some very long distances. Often as a result of this, but also due to other influences, some non-resident fathers were restricted in the type of employment opportunities they took up, choosing to do agency work, shift work and short-term casual jobs, as well as night work, so that they could prioritise their opportunities to spend time with their children.

Kyle, 23 at interview, was responsible for an unplanned pregnancy with a woman on a casual one-night stand on an evening when he had just had a storming row with the woman he loved and wanted to marry. His story reflects how changing notions of responsible, flexible fathering affected both him and the woman. Neither of them had any intention of becoming a couple; however, they both immediately involved themselves in negotiating his hands-on involvement in the pregnancy.

Kyle managed his part-time work and study commitments in such a way as to be able to attend all of the hospital visits and plans to be there for the birth of his child, something the child's mother supports:

Well, I think it's pretty much taken as expected of me, really, I think. I think that's pretty much expected across the board these days, of fathers. I suppose if you're not, I don't know if you can stand being in the same room as her I suppose. You know, I think, yeah, I think I want to be there, I think it's a duty upon myself to be there as well. I mean, in fairness, how many chances do you get to see your first child being born? I mean, you only get the one, so...

(23-year-old expectant father, planning to be non-resident co-parent)

Being a concerned and involved father from the time of the conception played itself out for this man in interesting post-traditional possibilities. Although he claims neither of them had intentions of becoming a committed couple, they negotiated sleeping together, platonically. He can be close to his unborn child and also they give each other a form of emotional non-sexual support at this confusing time in their lives:

It's funny, when I first found out about it I'd sleep over with [name], in we'd share a bed but there was no, there was no sexual connotation, you know. There was, I don't know, it's kind of very hard to describe how I felt, kind of scared and happy and freaked out all at, kind of, once. I don't know, circumstances more than anything else is learning, I was just trying to get closer to [name] in a non-sexual sense, in a platonic sense. And it is very important to have a good relationship, obviously, with my baby's mother, obviously, so I mean that's basically, you know, kind of getting to know each other a lot better, you know. Everybody has their little quirks and things and that's what makes them a person you know, so ... She needs, she needs me there not in so much as a, as a partner but as a, I suppose as a companion and as a father, basically.

[23-year-old expectant father, planning to be non-resident co-parent]

Such evidence suggests that for some the separation of sex from marriage and parenting from committed adult relationships is coinciding with the development of much more flexible definitions of responsible mothering and fathering. Some men and women faced with crisis pregnancies are negotiating new 'post-traditional' forms of responsible parenting, which play a key part in decisions to have the baby and which call for imaginative ways of getting to know one another better in preparation for parenting their child while not being (or sometimes never having been) in love and living apart.

5.2.5 Finding out after the event: Men excluded from decisions to have the child

As we have shown in this report, some men - sometimes by design, sometimes not - do not know the outcome of many of their sexual encounters because they have no further contact with the women. Cyril, 28, was the father of two children by two different mothers. He spoke with a clearly developed sense of his own procreative responsibility, but this was hard-earned: he recalled the sexual risks he had taken as a teenager, including a number that resulted in pregnancy scares. For him, the problems began because even the basic facts of life were not explained to men (and women) at a young age. According to Cyril, in becoming sexually active one "never thought of the implications."

Cyril never developed a practice of carrying or wearing condoms: "If the girl had one and wanted me to wear it I would," but he did not really see it as his responsibility. His procreative irresponsibility eventually caught up with him, one night at a local disco.

I was in the disco, and I knew this girl that I was after having the child for. I said, went up to her and said 'Congratulations, I heard you had the child,' and her face dropped and she kind of came back two minutes later and said, 'Well, yeah, it was yours.' ... Didn't, didn't even know she was born ... And she was six weeks old. It was like someone had hit you with a hammer in the face. A night you go out, like; I

left the house at eight o'clock that night, young, free and single, and at half one I was the father of a six-week-old child.

[And how did you feel, like?]

I think, I think it took me about two years to kind of come to terms with it. I don't know whether it was denial, or, I don't know, it was, I can't really explain it, it was like someone hitting you, it was just shock ... About a year it took me to get over the initial shock, to actually say, 'Right, that's your child,' because, do you understand ... like, I said to myself ... 'I'm fucked, me life is over, it's the end of me.'

[28-year-old father]

The initial shock gave way to anger that he had not been told of the pregnancy and had missed out on the birth and first six weeks of his daughter's life. During that first year he became more fully involved in sharing the care and parenting of his daughter, and became very focused on wearing condoms so as to avoid any more surprises. He spoke warmly about how he planned the conception of his second child (with a different woman: his long-term partner) and made sure not to miss out on all the moments he felt he had lost out on by not being told about the first pregnancy in time. This exemplifies again how for some men it took the reality of an unplanned pregnancy to act as a turning point leading them to focus on becoming sexually responsible.

5.3 Crisis pregnancies as opportunity: Marginalised men, fatherhood and social inclusion

Our findings indicate some clear differences along social-class lines in sexual attitudes and behaviours around the risk and management of unplanned pregnancy. For some of the youngest and most marginalised men in the sample, getting a woman pregnant and the possibility of becoming a father (even a non-resident one) offered them a real opportunity to succeed in life. As research has shown, fatherhood can be a purposeful route to a more meaningful life and social inclusion, in a context where the young men feel failures in everything from education, to employment and being law abiding (Ferguson and Hogan 2004). This does not mean that the men deliberately set out to get women pregnant so that they would have a role in life. The processes at work here are more post-hoc realignments to changed realities, with the men adjusting positively to the news of an unplanned pregnancy. At the other end of the social-class spectrum, professional men in the sample were more likely to regard an unplanned pregnancy as a huge crisis, and something to be avoided at all costs so that it would not throw them off their chosen life trajectory or prevent them from fulfilling their career ambitions (see Chapter 3).

One young marginalised man remembered how on telling his own father that he had got a woman pregnant his dad shook his hand firmly and said, "Good on you son - I always knew you had it in you." Another 18-year-old father – Jason – turned up to the interview with his two-week-old son and seemed to offer his hands-on caring as evidence of, on our terms, his procreative responsibility. His 16-year-old girlfriend was having a lie-in. Parenting – while something very new to him – was "no trouble," as far as he was

concerned. Throughout the one-and-a-half hour interview the baby was restful and quiet. On the few occasions when the baby stirred his father was attentive and it was he who called time on the interview, insisting that the baby would soon need his feed.

While life, he said, was boring until the birth of his son, there was no real problem with it. Despite his girlfriend becoming unplanned pregnant when he was 17 years and she 15, the pregnancy, the birth, the fact that both were poor school attendees, their unemployment and housing conditions caused him no apparent worries. From the age of 14, he and his mates drank a lot and soon after began having sex. He was "too ashamed" to ever go to the chemist and buy a packet of condoms. In fact, he had never in his life ever purchased a packet, always getting by on single ones or none at all. He made it clear that he had been informed at school when he was 14 that sex without a condom led to pregnancy. But for the most part condoms were something he never bothered with, "Why should I?" Sex was something to do (in part perhaps because of the absence of other opportunities): "Like, me girlfriend just lives across the road, so, like, I just goes over and has sex, you know." He claimed to be having sex with his girlfriend three times a day around the time she fell pregnant. For him women are as interested in getting sex as men are: "No, they're into it. They're into it, yeah. Sometimes they do, sometimes they don't, like. I don't know anyone now that would turn it down if it was in front of them. You know, like, I'm just a fellow that likes sex."

While there is something very stereotypical in this young man's representation of his voracious sexual needs, research suggests that such marginalized men are "*not* simply adopting the conventional stereotype of masculinity" (Connell 1995: p110). These young men can be at ease with non-traditional gender roles, which can involve attempts at egalitarian relationships with women and actively nurturing their children. The struggle, however, in researching these men (and for society in realising the valuable contribution such young marginalised and vulnerable fathers can make) is how these men's presentation of self involves "a lot of concern with face, a lot of work put into keeping up a front" (Connell 1995: p111). Such interviews show that the front that vulnerable fathers keep up to the outside world can belie the active, nurturing side of themselves they may express in private.

A further example of how for marginalised young men fatherhood could be a form of social inclusion is apparent in the narrative of Keith, a 24-year-old man who had attended a school for children with special needs before being committed to juvenile prison. He had impregnated his 16-year-old girlfriend while she was living in statutory residential childcare. While the state services viewed this couple as 'high risk' and were continuing to work with the mother on a daily basis, the expectant father, who had moved into the mother's one-bed flat to support her and his child, felt that they were completely avoiding him. While the official system was apparently alarmed about this 'at-risk family', the man himself beamed as he said, 'I'm so happy: I always wanted to have a child and be a dad.' The crucial point here is that even when, or maybe especially when, there are concerns for an 'at-risk' family, professional systems often miss out on the opportunity to engage productively with the man as father - even where he is trying to offer care to his child and family in a responsible manner (Ferguson and Hogan 2004).

Young people looked after by the State are one of the most vulnerable and marginalized groups in society. John had just turned 18 when interviewed, and his 17-year-old girlfriend was expecting their first baby in three months. Both of them had grown up in statutory care and had been spoken with very openly from a young age by their key workers about the importance of condoms. He was quite sure that social care workers, who are mainly women, spend more time talking with teenage girls about the risks of sex than with boys, possibly, he thought, because if the girl gets pregnant the key worker has to look after that child too! Yet John clearly understood that having sex without a condom meant you could get someone pregnant. And while he said their pregnancy was unplanned it was striking how focused and pleased he was to be now planning their new home together. He was part of all the pre-natal visits and scans, and was, as he said himself, "loving every minute of the pregnancy." When asked about the future he was exuberant; he couldn't wait to become a dad and had absolutely no sense of worry about how he would manage actual fatherhood: "It will all be fine."

Sadly, however, research suggests that it often is not "fine" (Furstenberg 1995, Ferguson and Hogan 2004). The gap between the fantasy of involved fatherhood and the practice for young men most often finds expression in their inability to be reliable partners and carers for the child. Indeed, this realisation is implicit in the narratives of those men and their pregnant girlfriends already cited in this chapter, who recognised the key role played by grandparents to supplement the father's secondary and often more unpredictable role. The problem the men have is in adjusting from the (public) culture of the male group - life on the street, in the pub - to adopt disciplined domestic routines, which are essential to good parenting. It is not, as our findings show, that the fathers are not good enough parents in their own right when they are with their children. It is the unreliable aspect to them, their tendency to disappear and be unaccountable that renders absolute trust and reliable parenting so difficult. The danger - and essential inequality - for women/mothers/ grandmothers is how they are assumed not only to be primary carers for the children, but required to act as mentors for (wayward) men. These narratives are classically gendered in that mothers and grandmothers are expected to steady the men in a manner that could make some kind of active fathering possible.

However commendable it is that some working-class younger men turn an unplanned pregnancy into a deeply wanted pregnancy and cherished baby, and despite fatherhood having a role to play for some men in promoting social inclusion, such unplanned fatherhood cannot be allowed to provide the legitimate basis for social policy. The unpredictable nature of how such pregnancies turn out is such that we are arguing that policy and practice should be guided by the principle that a man should only become 'a true father by producing children he wishes to parent and has the means to care for properly' (Morris 1996). This refers to having the emotional resources to care for children. Young men need to be supported and challenged at all times to make *conscious* decisions about if and when they wish to become fathers and practice accordingly in procreatively responsible ways. And they need to be fully supported to be active parents on becoming fathers, whatever their circumstances.

5.4 Conclusions and implications for policy and practice

This chapter has explored the meaning of 'crisis pregnancy' to men in the study and shown that not all unplanned pregnancies are 'crisis' pregnancies. Some unplanned pregnancies immediately or quickly become wanted pregnancies. For those men who wished to take some responsibility, an unplanned and unwanted pregnancy was a crisis. The chapter has examined men's self perceived roles in crisis pregnancy where the outcome was that the pregnancy went to full term. This showed that views of men in crisis pregnancy situations as feckless and potentially careless fathers are selective. Some men clearly are irresponsible and don't want to know, but some men respond positively to the news of a crisis pregnancy and are committed to trying to be involved fathers.

- Policy and practice need to recognise the fact that some men play a key role in negotiating decisions about how crisis pregnancies are managed.

The chapter has shown how the separation of sex from marriage and parenting from committed adult relationships is coinciding with the development of new discourses about responsible involved fathering. Decisions to resolve crisis pregnancies by allowing the pregnancy to go full-term correlated with the man (and woman) being able and prepared to be 'post-traditional' in outlook - that is, if they were prepared to adopt a flexible approach to creating a 'family', particularly with men being prepared to live apart from the prospective mother and commit during the pregnancy to being a non-resident father.

- Policy and practice need to recognise the importance of negotiating new ways of responsible parenting; this includes how the couple can get to know one another better in preparation for sharing parenting of their child, even if living apart.
- Sex and relationship education needs to prepare young men and women by enabling them to see the choices they have to create post-traditional families and also the consequent lifelong responsibilities that such choices will entail - which can both enable them to be fully responsible for preventing unwanted pregnancies, and which may assist them in decision-making should a crisis pregnancy occur.

A key factor for those couples who decide to have the child, whether living together or apart, is the support of their own parents and extended families - especially grandmothers - with the pregnancy and subsequent childcare. Men who became fathers and did not live with their partners were particularly dependent on their own mothers for support.

- While the men viewed the role of grandmothers in particular as hugely positive, we cannot assume that grandparents/mothers always want to play this role or do so without being burdened. In having the key role they perform recognised, grandparents need to be supported - financially as well as socially - by the State and others.

6.0 Men's roles in decision-making about and experiences of abortion

The focus of this chapter is on crisis pregnancies that resulted in decisions to have an abortion. It explores men's narratives when discussing issues relating to sex and abortion, the self-perceived roles of men in such decision-making, men's experiences of such crises and the outcomes of decisions to have an abortion.

This chapter is based on interviews with eight men who experienced ten abortions between them (two men had experience of two abortions each). The interviews highlight complex factors and processes that influenced the decision to have an abortion, from the men's perspectives. It must be stressed again that not only is this sub-sample of men small, but the manner in which they were recruited is likely to have created some bias in the types of stories made available to the research. Three of the eight men came forward in response to being approached to take part by a link person, while five were self-selecting as they initiated contact directly with us following a national newspaper article appealing for men with experience of an abortion to come forward. Thus the narratives presented here may well be confined to men who have been left after an abortion wanting to talk things through to make sense of their experience and articulate their story. The bias in the sample arises from the absence of men with different experiences of abortion, including those who don't want to talk about it, or who behaved less responsibly - given that people who volunteer for research such as this tend to regard themselves as having behaved well.

It should also be stressed that we are aware throughout that because women's perspectives were not part of the research, and even though the men spoke at length about what they perceived the women's views to be, we do not have direct access to the crucial factor of the woman's needs and wishes in relation to the crisis pregnancy/abortion. That said, the men's accounts that are presented here have great integrity and importance in their own right and point to significant findings for the development of policy and practice with men, women and couples at the time of a crisis pregnancy and post abortion. The findings also point towards the critical need for further research in the area of men's roles and experiences in abortion situations.

Given the relatively small number of relevant cases, the chapter uses in-depth interview material, which is integrated into a number of themes that emerged.

6.1 Uncovering men's stories of abortion

In the initial period of the study we interviewed 35 men of various ages and backgrounds who represented a wide range of sexual experiences, contraceptive practice and pregnancies, including three men who had direct abortion experiences. These men were recruited by being approached by people in organisations who acted as link persons for us in recruiting men (see Section 1.5.2). We decided that in order to meet the full aims of the study, we needed to increase the sub sample of men with abortion experience and so we purposefully targeted such men. We placed an article about the research project in one national Sunday newspaper (*Sunday Independent*, January 18, 2004) and asked for men with abortion experience to contact us, by voice or text through (mobile) phone or through an email address.

The article generated significant media interest. We were contacted by a number of regional newspapers and local radio stations, as well as being invited to appear on daytime television and prime-time national radio (RTE). Within the first week following the newspaper article eleven men contacted us who had direct experience of abortions. Given this number of immediate respondents we were satisfied that we could now interview enough men with direct abortion experience to say something of value within a relatively small-scale qualitative study. Having initially worried that we might not be able to recruit enough men with crisis pregnancy/abortion experience, we were now very concerned not to become overwhelmed with contacts from men who we might not be able to interview. We felt ethically obliged to be in a position to offer an interview to as many men who made contact as possible. Hence, having initially agreed to go on the RTE radio programme, we decided not to take up the opportunity to recruit anymore men through that (or any other) route and to use the daytime television programme to speak more generally about the research project. We suspect that had we gone ahead and used the RTE radio programme to recruit men we would have received a large number of contacts.

Eleven men made contact through the newspaper article and they were living right across Ireland. We were able to successfully meet with and interview seven of them, all of whom went to great trouble to meet with us: Four travelled over 100 miles (one way) to attend the interview. The other three were interviewed in the evening-time after their work or at weekends. Five of these men had experienced abortions, while two had planned abortions but, they said, persuaded their partners at the last minute not to go through with them. These men's stories were covered in the previous chapter. Four of the 11 men who made contact were not interviewed: two decided not to go through with a face-to-face interview on the basis that they now realised they did not want to relive the experience by recounting their story of abortion. Two other men were prepared to go ahead but, unfortunately, the interviews didn't happen, mainly due to practical reasons (primarily being unable to find a mutually convenient time to meet.) We were, however, able to avoid the men feeling left high and dry through having considerable contact by telephone and email.

6.2 Men's positive and negative experiences of abortion

The length of time between the abortion experience and the research interview ranged from six months to 34 years. As we pointed out in the last chapter, this, in large part, reflected our decision to focus on interviewing men who had been through a crisis pregnancy, rather than men who were currently in a crisis (even though the latter men could have chosen to contact us in response to the newspaper appeal but interestingly they didn't).

In six of the eight men's experience the abortion happened with the man's knowledge and some kind of involvement in the decision. Two men were told about the abortion after the fact. Thus six of the men felt they had at least some involvement in the decision to terminate the pregnancy. This varied from men who felt consulted but essentially "blocked" out by the woman who had already decided to have the abortion, to those who felt intensely involved in negotiations with the woman. The data suggests an important distinction between men's assessment of the rights and wrongs of the decision to have the abortion - of the ethical basis of the decision and the consequences of the decision

for them - its emotional, psychological and practical implications. The men's attitudes to abortion prior to the crisis pregnancy - whether they were for or against it - appeared to have less impact on decision-making than pragmatic concerns and identity issues, such as whether the man really felt able to be responsible for a child and the costs to his career.

Some simply didn't love the woman, and they and/or her were not prepared to parent a child in the kind of post-traditional arrangements we saw in the last chapter. Even if some feelings of love were present they were not enough for some men. As one put it, you are either "in a relationship or you are out." There was a stronger tendency for couples in abortion scenarios to keep the pregnancy secret. Just as we showed in the last chapter that grandparents, and especially grandmothers, played a crucial role in providing positive support that led to a decision to keep the baby, grandparents in abortion scenarios tended to be perceived as unsupportive of the pregnancy and some mothers of pregnant women played an influential role in some decisions to have abortions, usually in collaboration with their daughters and to the exclusion of the man (three cases).

All eight men expressed some emotion about the abortion experience, be it sadness, despair, anger, relief or a sense that it gave them the opportunity to plan their own life-course. However, the men varied considerably in the nature and intensity of feeling they expressed and in their sense of the short- and longer-term impact of the abortion on them. Some were deeply upset, others quite indifferent. Some came to really value, appreciate even, the learning and opportunity to become focused in planning their lives the abortion gave them. Five of the men experienced the abortion as having positive and negative consequences at the same time. Positive experiences included relief and the opportunity the abortion gave them not to have to be responsible fathers, to have their freedom and make the most of it to try to create successful lives. Yet in the midst of expressions of joy and a sense of personal development, the aftermath of the abortion left the same men experiencing some guilt, self-recrimination and struggles with intimacy.

For three further men in the sample the impact of the abortion was more negative. One man felt the abortion experience had brought no redemption and had ruined his life. One other attempted suicide soon after the abortion but has since got his life back together successfully. The other six men were coping well.

The complex mixture of positives and negatives in the men's experience makes it difficult to characterise the meaning of the abortion to them in any straightforward way. Whatever opportunities it had brought, all of the men wished it had never happened and all but one of the eight felt like it had left a mark on their sense of self. Three men cried during the interview as it reconnected them with the anxiety, sadness, relief, loss and hurt they had felt. But seven of the eight men regarded themselves as having broadly recovered and to be coping well. Yet no matter how recovered and mentally healthy they considered they were, most felt there was still a sense in which it would always be with them. Matthew captured this ambiguous experience of abortion as both opportunity and loss as "the would've, could've, should've" feelings:

I told one professional about the abortion. He's the sort of man that'd listen to anything and try and help you out, or find someone to help you out. But I didn't talk my deepest feelings about it, I probably never will to anyone, even including yourself, I won't. I mean, I'm not blocking things out, but there are thoughts and feelings and things that everybody keeps to themselves. I mean, I am going to give you, try my best to tell you mostly everything but I can't tell you the, I can't even find them myself inside my own heart how, not bitter, I feel; I don't feel bitter, but I just feel, I don't know how I feel. It's, the would've, could've, should've, you know them feelings? Do you get me? Ah, 'What if I was a dad' or 'What if I did have a baby. What would life be now?' Life could be better or life could be worse, and to be honest with you I think life is better now that I didn't have a kid because I have so many doors and so many opportunities I can do now, that I don't have anything holding me back.

(22-year-old professional and part-time entertainer, abortion experience when 20)

The abortion tended to hold great power for these men as a fateful moment when their lives could have taken a very different direction. In this respect the narratives suggest that crisis pregnancy decisions are part of new demands of life-planning in a post-traditional order where the Church, parents and so on have less authority (Giddens 1991). Conscious of the openness of the future, the men made more of their lives, aware that they could have chosen otherwise. So they had an intensified desire to live the best life they had planned.

Just one of the eight relationships survived following the abortion. Four of the seven men whose relationships ended considered the abortion a key factor in their subsequent splitting up with their girlfriend; the relationship breaking up was a source of further distress. The dilemma in making sense of such claims is that it is very hard to attribute the *exact* influence of the abortion to the relationship breakdown, or to know whether the decision to have the abortion was made within a relationship that was already vulnerable. What is clear is that four of the men themselves blamed the abortion for the breakdown of their relationship, and other large-scale research on the aftermath of abortion shows that relationship breakdown occurs in the majority of cases (Shostak et al. 1984). Equally, it is difficult to establish the exact influence of the abortion on the man's distress at the time when other upsetting factors like the breakdown in the relationship were present. In the case of the man who attempted suicide, for instance, which we discuss in more detail below, he felt deeply upset by the abortion, and his girlfriend ending the relationship shortly afterwards was also an important factor in his vulnerability.

6.3 "Not wanting to be stuck with a kid": Abortion as an opportunity to plan a good life

Seven of the men with abortion experience regarded themselves as having lived quite full and satisfying lives in the sense of travelling, working outside of Ireland for periods, career development, excelling at sport, having (more) sex with different women and fun, and generally not being tied down. Even the one man who had an abortion experience with a previous girlfriend and had married following another crisis pregnancy with a different woman was relieved about the earlier abortion because of the opportunity it had given him to settle down with a woman he loved and have two wanted children with her.

A crucial distinction emerged between a sense of guilt, sadness or discomfort that men said they felt at having been part of a decision to terminate and the benefits some recognized as flowing from the decision. As Matthew, a 22-year-old professional and part-time entertainer who had an abortion experience put it:

But I'm a happier man that, I can't say I'm a happier man that I did it. I mean, I have more opportunities, more doors open for me these days. I mean, I don't know what's around the next corner. I mean, I'm in college, I'm working, I'm dancing, I'm full of life, I'm out doing this, that and the other. I mean, I don't want to be stuck with a kid, coming home every night listening to shite or telling her do this and that.

(22-year-old professional and part-time entertainer)

Matthew's girlfriend of eight months had the abortion two years previously (when he was 20 and she, 19). He was at college, she worked. He was extremely and recklessly hedonistic in his pattern of sexual practices. He said he loved her and wanted the baby, or at least didn't want her to have an abortion as he was fostered as a baby and grew up in care and argued that had his parents decided to abort him he would never have had a life. When his girlfriend insisted she was having an abortion he was very upset, had sleepless nights, "cried myself asleep night after night", but accepted it as he had long-term doubts about whether he could "say that's my baby, I want that." So, while expressing views that the woman "blocked" his opinion and voice and that men in crisis pregnancies need to be listened to more, ultimately he seemed to welcome the abortion. He borrowed money from the bank to finance the abortion and accompanied his girlfriend to England where he arranged for them to stay in a nice hotel and go to shows, in an effort to help her forget about or lessen the intensity around the abortion. She ended the relationship soon after their return and he was angry that she had not paid any of the money back and closed him out.

"Not wanting to be stuck with a kid" expressed a recognition of and desire for a certain freedom and a particular kind of life. Another man expressed the reason for eventually agreeing to the abortion with greater fragility in terms of at the time "trying to get my own life together" (28-year-old professional, had abortion experience when 21). It was not simply that fatherhood and a long-term committed relationship were not on the men's agenda. It is deeper than that with respect to the individualised freedoms the men become aware of and perhaps felt entitled to in planning their lives. When faced with a crisis pregnancy men are placed at a crossroads in relation to what kind of life they want. The decision to have an abortion creates an intensified awareness of whatever choices and freedom they have and increases their desire to enjoy and plan their lives, as individuals rather than fathers or husbands. Moreover, it enables them to experience the fact that in a post-traditional order life can, and must, be planned: that they have new choices about how to live and who to be (Giddens 1991).

Matthew emphasised how much he had achieved professionally since the abortion and how enjoyable his life was. When asked if he felt that the unplanned pregnancy and abortion had pushed him to want to get more out of life, he replied:

Oh totally, totally, because, to be honest with you, I would be stuck in a rut if I did have that [child]. I'm not saying it [abortion] was a bad thing, I'm not saying it was a good thing either. You know, I'm not going to give you a straight answer on that because I don't know if it is good, I don't know if it is bad - it's both. The good thing is that it has showed me that there's more to life out there than sex and having a kid. There's more to life, there's more, there's just getting yourself fucking sorted first, and then go plan a family and even if you get ran over by a bus between here and then, at least you've had enjoyment of trying to get places of somewhere, trying to get yourself on a stepping-stone of what you enjoy doing, do you get me?

[22-year-old professional and part-time entertainer, abortion experience when 20]

However, there is no guarantee that things will work out as planned post-abortion, and although Matthew could see the benefits of the abortion in that it allowed him freedom to live his life as he chose, the abortion remained an emotionally painful experience for him:

I am deeply hurt, but I don't show it because that's the sort of lad I am. I won't, it's bad to hide feelings or, you know, it's not good to hide feelings, I keep feelings inside, I've learnt all this shit, man.

[22-year-old professional and part-time entertainer, abortion experience when 20]

Whatever emotional problems arose from the abortion occurred for this man in the context of a history of having grown up in a foster home and residential care and are discussed here in the context of overall growth, success and happiness. The abortion is retrospectively seen as crucial to that achievement, and Matthew offers a vivid account of how the intensity of it "fades" as time goes by:

The only support I got was from [former professional care worker], and the only support I got was from talking about it. I wasn't talking about it properly, either. It was, I hid most of, most of everything and to be honest with you in the two years that it's happened, it's faded away slowly, like a broken-up relationship, as if you're in love and it fades away and you never, you think at the time it's never going to fade away, it's never going to fade away. You cry yourself to sleep for the first six months, you know, but it does fade away to an extent. To an extent that you don't cry about it anymore, and you don't talk about it anymore, but deep down inside your head - I know until the day I die, I'd still know this happened to me. I don't think about it every day, not every week, but maybe once every six months - a documentary pops up on TV or if I read something in a magazine or something. Now I get emotion for two or three minutes: I don't cry but I just, thought in my head going, 'Fuck - that happened to me,' you know. You know if you read in a magazine or a newspaper something about an abortion or, do you get me?

[22-year-old professional and part-time entertainer, abortion experience when 20]

Another important factor in shaping the meaning of the abortion in the man's life concerns the psychological and moral character of the man at the time of the crisis pregnancy. This influenced the degree of sensitivity of the man to the woman's and his own feelings and the level of vulnerability and resilience he brought to the crisis. In the terms that we have framed it in this study, the man's pattern of sexual practice at the time seemed significant. Thus men in the 'steady' pattern were highly sensitive to the woman's suffering and anxious to contain it, which fits with the sense of 'decency' that we showed in Chapter 3 is at the core of this pattern.

Roy, 35 when interviewed, had an abortion experience when he was 25. It was the third "serious" sexual relationship he had since his first experience of sexual intercourse at 19. He was surprised to find his girlfriend of four months was pregnant, given that they used condoms unless she told him it was the safe time of her cycle: "It was the actual miscalculation of days on a cycle, you know." They were not in love. He felt that even without the abortion the relationship was struggling and would not have lasted more than three or four months. The woman did not want the baby from the start and was, he felt, heavily influenced by the fear of bringing shame on her middle-class family and especially a "prominent" father. Roy feared for her mental health.

What I did at the time was, the way I handled it at the time was, what I did was I offered to actually give up the studies that I was doing and to get out into the workforce and at least, you know, be in some way capable of supporting both herself and the child, if she decided to go ahead with the pregnancy. If she wanted to have a termination then I would equally support her, you know, in that regard. Personally did it come down, if I were to come on a decision on which would have been the most preferable route to take from my point of view, my point of view was coloured completely and totally by whether this was going to be good for her or not, okay? And I was really consumed with this belief that I don't think she's going to be able to cope, you know, and that was my biggest fear and my biggest worry. What I did do was, I insisted, I encouraged, and then I insisted on her going to a family planning clinic to get professional counselling or advice and I offered to participate in that.

(35-year-old single man, abortion experience when 25)

She attended the counsellor along with him. To his horror the counsellor completely excluded him from the meeting. His girlfriend decided that day she definitely wanted an abortion. He paid for the abortion, travel and accommodation and wanted to go to England with her, which he saw as being responsible. But she was adamant she didn't want him to go, which he accepted in the end. She didn't even want him to pick her up from the airport but he did and she was very "cold". A few days later she ended the relationship. There was no contact - not even by phone - for a year, after which time she got in touch. She was very distressed by the abortion, broke down crying and they discussed it. He wanted her to get professional help. They met again periodically over the years, most recently not long ago, when she admitted that she had been suicidal and felt she had committed murder. He regarded this as partly due to the "stilted Irish way" of judging and stigmatizing abortion. He moved abroad to work soon after the abortion - for many reasons, notably family conflict not connected with the abortion (about which he never told them).

Roy had not had a sexual relationship since the abortion ten years ago. This could easily be misinterpreted as the abortion causing a withdrawal from intimacy, when in fact he was only doing the same or more of what he did before the abortion, exemplifying a steady pattern. He did not attribute the absence of a sexual relationship in the ten years since to any "psychological damage" from the abortion, more to his long-standing approach to relationships and to his frequent travelling:

Ah sure look, I mean the thing about it is, I know for somebody who hasn't talked about it I probably seem well able to talk about it now. I'm well able to talk about it because I don't, I don't feel the shame or the guilt associated with it. It's taken a long number of years to cope with that and it's taken an awful lot of growing up. I mean one of the legacies, I haven't gone out with, I haven't had a sexual relationship with anybody since that girl, for example.

... It wasn't out of any kind of, how would you say, would you call it psychological damage? Nothing to do with that, it's just that I probably wasn't ready, I didn't, I found myself in loads of situations where I probably could have initiated short-term sexual encounters, one-night stands, that kind of thing, but I mean, you have to be honest with yourself at the end of the day, you know, and, I mean, if it doesn't feel right to you, it's probably not right for you, do you know. And that's the philosophy that I have had for a few years, you know, and I suppose the thing about it is too that, you know, you're moving around and you're travelling quite a lot - you're not going any place for any significant length of time to develop a quality type relationship with different people or individuals.

(35-year-old single man, abortion experience when 25)

The man's pattern of practising intimacy since the abortion was similar to what went on before it, and the steady sexual pattern he established in his early twenties prefigured his response to the crisis pregnancy and its aftermath. And once again we see how he made a virtue out of it by maximising his freedom to travel and so on.

6.4 Men's vulnerability and therapeutic discourses on abortion

As we have seen, for some men who said they were emotionally affected by an abortion, the impact was short-term. But some others felt the distress caused by the abortion was long-lasting and deep-seated. For one man the negative effect of the abortion on his life had not "faded", even after 34 years. A 57-year-old man, here called Joseph, felt that his experience of an abortion had had such an impact that it had ruined his life. His girlfriend travelled to England 34 years ago when he "made her pregnant outside of wedlock." The context was one where dating meant going to a dance at the age of 18: "You'd meet someone you liked and you would talk with them for an hour or two and then say goodnight. The most you would do is give them a kiss goodnight." He felt he acquired the facts of life as a teenager from growing up on a farm, and understood what his father meant when he would tell him "not to interfere with a girl."

Part of the "sadness of it all" for him, was that he made his girlfriend pregnant after having what he called "half sex", the first time ever they "fooled around". Then after three or four weeks she told him she was pregnant.

At first all I wanted to do was to run away with her so we could keep the baby. I had seen other girls disappear to Dublin or London and they just never came back. We wanted to keep the baby but we couldn't: we weren't married and I couldn't just run away and leave the farm and my [elderly] parents; I was the only son.

[57-year-old married man, abortion experience when 23]

With respect to decision-making about the abortion, he remembered that "they sort of decided together, but she did really." His girlfriend told her friend in Dublin who helped her to arrange her trip to England for the abortion. Joseph spoke with or told no one at the time. He met her on the day of her return from the abortion and they announced their engagement. They were married later that year, but did not sleep together on the first night of their marriage:

We both knew we done wrong, that what we had done was a sin, so on our wedding night we didn't do it [make love] as a way of punishing ourselves.

[57-year-old married man, abortion experience when 23]

Throughout their marriage they never used contraception, having sex either to conceive or at the time of the month when his wife told him it was safe.

I'm not proud of myself, I know I did wrong. What I did was a sin and I'm ashamed of myself for having done it first [getting her pregnant] and then for the abortion too.

[57-year-old married man, abortion experience when 23]

During the first three years of their marriage his wife had a number of miscarriages, which they both felt were as a result of the abortion, the first in a long line of ailments, "our punishment for what we had done." Throughout his marriage he has refused to talk about the abortion, even with his wife. During this time his physical health has rapidly declined; yet he refused to seek medical attention, believing that he had cancer and that he deserved to die. The combination of not talking with his wife, not caring for his health and consequently not being able to play a part in the care of his children meant that their relationship became poor. He remembered refusing to do anything with their first child, believing that he himself would soon be dead. Regarding his and his wife's responsibility for the abortion he feared their children would be "cursed for their sin."

Joseph and his wife went to confession, to the same priest, who was very hard on his wife, but not too hard on him. His wife gains great comfort from her faith. Not talking together has remained a difficulty in their relationship. They have not had any sexual intimacy in seven years, sleeping in different parts of the house. The farm, in fact, has served to keep them together, needing both of them to work to cover times when one or the other was sick.

For the past two years his wife has been going to counsellors about the abortion, and he went with her twice but has refused to go since.

It does no good for me whatsoever talking about it: it won't take it away, will it? And when [wife's name] wants to talk about it I don't, because it will only hurt her feelings reminding her of it, so I keeps it to myself. She has gone to a counsellor for two years and I went with her, but only twice. I ended up thinking of the abortion all of the time then, getting pains and being sick all of the time. So I stopped going then...Usually I just think about the abortion two or three times a day.

(57-year-old married man, abortion experience when 23)

His wife always asks him to talk about how he feels, but he refuses to engage because he does not want to upset her - he feels it is best if they do not mention the abortion at all. It is because he does not like to upset her that when she asked him to come for the research interview (which she heard about in the media) he agreed. He also wondered if it might help some other man in the same circumstances, but he could not see how, as he felt another man in the circumstances would never read a book about abortions. When asked, Joseph said he did not find anything easy or helpful about the research interview (which was in contrast to the majority of men in the study). His advice to others was "do not have an abortion."

Elliot, the second man in this sub-sample for whom the abortion and its aftermath were associated with deep emotional distress, spoke of it in the following terms:

The effect of the abortion has been profound on me, you know what I mean? It's been profound, like; it has hurt me deeply, like, you know, and of course if it hurts me this much imagine how much it must have hurt the girl, do you know what I mean? I don't know where to start, really. It has damaged me and it's affected, like, it's affected, you know, my relationships since and it just hurt me a lot, like, you know. It scarred me.

(28-year-old single professional reflecting on an abortion experience seven years earlier)

What is striking about this man's story is the degree to which it is framed within a therapeutic discourse. At the time of interview he was in training to be a counsellor and had used therapy services since his early twenties. His post-addiction recovery group was a "safe space" within which he got support through the crisis pregnancy. His sexual pattern had been what we called in Chapter 3 'impulsive'. Having had his first experience of sexual intercourse at 19, he had sex regularly, in a protected, responsible way, and the crisis pregnancy was the result of impulsive risk-taking without a condom. He has used the abortion as a turning-point and now practises the safe pattern: "Even if somebody says they're on the pill, I'm like, 'That's great,' but in brackets, 'I don't give a shit. I'm wearing a condom,' like. That's, you know, I think that's good."

He gave his girlfriend £200 - just some of what was needed to fund the abortion - even though he had £500, but needed money to set himself up in flat. He regrets not giving

her more now and says he learned a lot and would do it differently today. He did not travel with her for the abortion - a friend did. The relationship broke up soon after the abortion. They weren't in love and he feels it was the best decision they could have made at the time. He often wonders where she is and how she is. The experience has made him "acutely aware of the level and the volume of hurt and pain that can be caused, do you know, without anybody trying to hurt anyone." A legacy for him is that "I'm afraid of commitment ... it's true, I am, and it's partly to do with that [abortion]. I'm afraid of getting into that situation again, you know." Being in therapy ever since the abortion has helped:

I did need specialist help, I did need, like, therapy and I got it for myself, you know, I was lucky in that respect. I consider myself lucky because I know a lot of men that don't tell anybody... Therapy would be definitely a key factor in it, and I sought out therapy for myself after it [the abortion] because I really felt vulnerable. It's not, like, that life wasn't going to go on or I was going to fucking have a breakdown or anything like that - it wasn't that. But I knew I was really hurting, like, you know. I knew, like, it was a lot of emotional pain, and you know I'm not sleeping at night, and I knew I needed to talk about it, you know. If there's emotional shit going on you need to talk about it - that's how you deal with, you know, that's how you process it...

(28-year-old single professional, abortion experience when 21)

His motivation for volunteering for the research interview (having heard about it through the media) and doing a round trip 200 miles to do it was itself primarily therapeutic. He needed to "tell my story." He doesn't expect to ever get "closure" around it but to be able to live with it better and, crucially for him, to help men in similar crises:

Like I said, I've told my story before, do you know what I mean, but my primary reason for contacting you was that, like, I know like how painful it can be and I was lucky enough to have support in place to carry me through that, you know. But it can drive people to terrible lengths, to, you know, self-medicate, anaesthetise themselves by whatever, you know, whatever way they want to do it, you know. It's a difficult thing to cope with, it's very difficult, you know, and if one guy reads it and gets benefit from it, then I'm more than happy to come down. I mean that.

(28-year-old single professional, abortion experience when 21)

The third man in this sub-sample attempted suicide following an abortion experience, but his story also illustrates some therapeutic possibilities for healing. Anthony, 21, lost his virginity at 15, enjoying sex as a teenager and celebrating his sexual 'success' in the company of his peers. An excellent sportsman, he was dedicated to proving himself on the sports field and had recently gone on to perform at the highest level. He recognised this as being a huge help in attracting the "cool girls." He appeared from the outside as the all-round 'masculine god', seeming quite literally "to embody force, to embody competence" (Connell 1987: p27). However, in his interview he revealed another side of himself as he became suddenly very upset and cried as he talked about how his

girlfriend had become unplanned pregnant three years previously and soon afterwards travelled to England for an abortion.

I was shocked, like, you know. I did know she was carrying my baby. At that age [18] you're not expecting to get someone pregnant so it was a big shock then. You're upset and whatever, all kinds of feelings, like. I didn't know what to do. She was devastated and I was looking after her, like, because no-one knew, because I didn't really think about it that much; I just don't know what I was feeling. I kind of wanted her to have a baby because it was my child. I don't know - it just hit me after a while, that she had an abortion and it hit me big time; I couldn't handle it, I suppose.

[21-year old, abortion experience at 18]

He typifies the pattern, which we discuss in more depth below, of how men actively silenced their own feelings and desires at the time of the crisis pregnancy in order to offer the best level of support they could to the woman who was carrying their child.

I had to stop kind of talking about it because I was upset about it. She was upset enough, but it was seeing me upset then as well would make her worse. So it didn't really affect me until afterwards, because of the way that she was really upset and worried and then all of a sudden, like, look after her and make her feel better, you know. I didn't think about that until after the abortion. It didn't hit me then until afterwards ... I wanted her to have it [baby], like, so I kind of knew she didn't, like, you know, because she wanted to go to college.

[21-year old, abortion experience at 18]

Anthony did not talk with anyone about the crisis pregnancy. He did not even speak with his girlfriend about his feelings, trying to protect her from his sorrow and fear of the abortion. He kept it all in and held back from saying what he felt, and was not even really sure how he felt. He felt "there was nowhere to go to talk about it."

I don't know what I felt. I wouldn't want her to have an abortion, no. But I used to say, you know, whatever you wanted to do. So I never said, like, you know, 'I don't want you to have an abortion,' or whatever. I just wanted her to be happy so ... I didn't even think, I didn't even think at all. I, she was really bad, real upset and all worried and stuff. I was worried then about her, you know, so I never thought about what I wanted.

[21-year old, abortion experience at 18]

His girlfriend broke their silence and told her mother, who organised an abortion in England, excluding Anthony from any negotiation about the decision. Two weeks after she had the abortion they split up, although they have tried to stay friends. Still, Anthony felt he could not share his burden with anyone. That was until he could not cope any longer and cut his wrists and was hospitalised:

It didn't hit me at all until after everything was gone, cooled down, that we broke up and everything, like. It was about three months after we broke up, I'd say then

it hit me. I didn't know what I was going to do. I didn't want to be around anymore. I thought I didn't want to live, I suppose. I just couldn't cope then, I had to tell them all, like, that I lost my baby. That was always in the back of my head: it was our baby, like. And [my family] they're the sort of family that just hold on to you if you need a hug, like, and they just said, 'You should have told us, like, if we went to it together instead of going to it on your own, like.'

(21-year old, abortion experience at 18)

The suicide attempt led to the abortion being disclosed and confronted in the family. The man received support and resolved himself emotionally to the abortion, which enabled him to move on. Anthony would now advise for men in a similar position to handle it differently to how he did:

I would talk to her, tell her, like - tell her I wanted it, and so when it would come to making a decision definitely talk to her, and tell my folks so we'd all have a big chat about it together and a hug, you know.

(21-year old, abortion experience at 18)

6.5 Negotiating decisions to have an abortion: Men's emotion management, silence and help-seeking patterns

Three of the six men with abortion experience who knew about the pregnancy told someone about it during the crisis. Another three did not talk to anyone about the crisis pregnancy and abortion, save for the woman involved. We include in this men like Anthony, above, who, although his girlfriend's mother was told by her daughter about the pregnancy and organised the abortion, he still did not discuss it with her or anyone.

It should also be pointed out that when men were excluded from decision-making and didn't even know about the abortion until afterwards (as happened in the case of two men) this created its own problems. Simon, aged 26 at the time of the abortion and now aged 34, cried when recalling how a previous long-term girlfriend called to see him one night in a very distraught state, not long after their relationship had broken up. He turned her away and only later learned from her that she had called to tell him she was pregnant. She couldn't tell him: "Because I was putting up all these shutters she said that she just felt that she couldn't say it." He felt tremendous guilt. "Her mother thought that I was the greatest scum that ever lived" and advised her to have the abortion. She had told him one night they bumped into each other at a party "and we spent the rest of the night just walking around talking and crying, got all, got everything out in the open. And I just felt like such a fool." However, this did not become a turning point in this man's sexual practices leading to the adoption of a safe pattern, as he got a subsequent girlfriend unplanned pregnant. They married and now have two children. On balance he saw the abortion as the right decision and as having created opportunities for him to have the life he now enjoyed.

Two men out of the six who knew about the pregnancy sought professional help at the time of the crisis to deal with it. Elliot was already in counselling and receiving aftercare support for an addiction problem.

I was like in recovery at this stage and I was in, like... I had, like, a support group, because I'd done a treatment programme and I had, like, an after-care group, which had very concrete limits of confidentiality and stuff like that and I felt, and I needed to talk about it, you know, and that was, for me, a safe place to talk about it and there were one or two other friends that I would have told, disclosed it to I should say ... but very, under the very clear understanding that it was a secret, like, you know.

(28-year-old professional, abortion happened when 21)

Elliot, 28 at the time of the interview, had remained in therapy to help him cope. He recounted the dynamics of the decision-making and an abortion seven years ago.

She was adamant she wasn't having the child, and I tried to come at it from different angles and really tried to talk about it and be open and speak openly with her about it, and no matter what way I came at it, like, she wasn't and eventually I said okay, I accept that, you know ... I kept saying blindly, 'I'm going to do whatever', you know, 'I'm going to support her completely, I'm going to do whatever she wants to do,' and desperately wanting to do the right thing but not knowing what the fuck it was, like, you know ... I wanted to support her and I wanted her to feel supported by me, do you know what I mean, even though I wasn't sure, I was shit-scared, like, you know.

(28-year-old professional, abortion happened when 21)

The other man who sought professional help was the only one to do so directly about the actual pregnancy. Roy, referred to above, went with his girlfriend to a pregnancy counselling service on his insistence, but was excluded from the discussion by the counsellor and got no help.

I was really, really angry that I hadn't been brought into the room and there was an element of responsibility there, you know, you know, that I felt personally responsible and yet I was being totally excluded from maybe facing up to that responsibility in some way, you know. I was so angry. I mean, I remember after the, the family-planning visit, the clinic visit, you know, part of the argument that I had with her that time was that, Jesus Christ, you know, I actually need to see some responsibility in this, I, you know, and I'm not being allowed any of that, do you know? I needed to feel some degree of responsibility, it's like, you know, a mistake had been made and you felt, you know, fuck it, look put your hand up, even going down the termination route, there are responsibilities there as well that you can do.

(35-year-old single man, abortion experience when 25)

This suggests that being involved in the decision-making process can help create a more fully developed responsibility.

It took Roy seven more years before he reached some sort of "forgiveness" for himself, when, although "not religious", on a whim he went to mass and confessed. "I said, this happened you know, six, seven odd years ago and I said, the only reason I'm here [in

church] is that I've just realised sitting down in the seat that it maybe time to forgive myself, do you know, for what happened." By the time he came for the research interview he had only ever spoken with his ex-girlfriend and the priest about the abortion.

The other clear pattern was for men to keep the pregnancy and abortion secret. This went hand in hand with men staying silent about their feelings and wishes in relation to the pregnancy, even to the woman. This involved a rigorous form of emotion management, which was practised also by some men who had spoken to someone other than the woman about the pregnancy.

I just asked her was she absolutely sure about this and comforted her. I can't really remember what I asked her. I just asked her was she sure and was this what she wanted to do. And I tried to stay as impassive to my own emotions as possible. I tried not to give, I knew she had enough on her plate as it was with the whole, dealing with the pregnancy thing, wanting the abortion thing, I knew it was hard enough on her as it was, I didn't want to land my stuff in on top of her so I just thought, 'Look, I'll deal with this myself.'

(20-year-old skilled labourer, expectant father)

Although giving nothing of his feelings away to his girlfriend, Patrick, a 20-year-old skilled labourer, had told his mother and several friends about the crisis pregnancy and expressed some feelings about it. (The woman pulled out of the abortion at the last minute and the birth of the baby was imminent at the time of interview.) These men seemed to believe this emotional closure was necessary in order for them to be as responsible as possible for and supportive to their girlfriends at this time; being there for them whatever decision she came to. A fear was that their sorrow, doubts and needs would be too much for the woman to bear on top of her own pain. The narrative of another participant, Leonard, exemplifies this pattern:

I know when I heard it first I was fucking freaked out: I didn't know what to do, because I'd nowhere to go to. I could have told some of my friends but she asked me not to tell them so I wouldn't, for her. I couldn't go to my family because it's not the type of thing you talk about in the house anyway, so I literally had no one to say nothing to except her, and I was freaking it. I honestly didn't know what to do. And then when she was sick, then it was even worse, you know, because it was the same situation. I still couldn't go to, you know, to my family or anything. But I swore anyway after the first time that this would never happen again, and of course it fucking happened two more times. But no, it was terrible, it was fucking terrible, it really was...

... I didn't know who to talk to. Like, one of my friends had a child that was living with his girlfriend, and I thought maybe I'll talk to him about it, but she wanted me to say nothing, you know. She really didn't want, she stressed it, like: she didn't want me to say to anybody. I don't know if it would have done any good at all, but it would have been a lot easier than working it out yourself.

(27-year-old single professional)

This finding is mirrored in other, larger studies of such men's coping strategies. Shostak et al. (1984), in their survey of 1,000 American men who accompanied their partners to 30 abortion clinics, found that 75% had spoken to no one about it other than the woman (p26). 17% 'had broken with the majority and reached out to close friends,' while 'only 8% confided in their mother, father, or both' (p27). They speak (p37) of 'the wilful isolation of the couple from everyone except one another', an interdependency which they regard as 'a by-product of their desire for secrecy.'

These American men 'felt the subject so stigma-inducing and personal they barely knew how to begin. And, once begun, how could they profit from such a discussion' (p28). The authors argue that such isolation was also a function of the way the men in the American study saw the definition of a being good man:

Beyond being responsible for keeping an extraordinary confidence, endorsing their lover's resolution, and bolstering her confidence in that choice, the men felt obliged to pretend they were someone else. That is, many men took full responsibility for their own doubts, hesitations, uncertainties, and even painful, opposing thoughts. They hid all of this from friends, co-workers, and especially from their partners ... Ironically, the silence of some such men can be misinterpreted by certain women as indicating the male has no feelings.

(Shostak et al. 1984: pp37 - 40)

We question the extent to which men who adopted this approach were, in fact, *fully* responsible. While men in our study felt this kind of silence was supportive to the woman, what they did not emphasize was that it also may have relieved them (the men) of full responsibility for shared decision-making. Their strategic control of their emotions enabled them to distance themselves from the responsibility of fully negotiating the decision, thereby controlling the situation to their own advantage.

Not only did some such men (and the couple) end up isolated, but the behaviour that led to the crisis pregnancy remained unchallenged, as the man had (or took) no opportunity to reflect critically on himself and the changes needed. This is exemplified by Leonard (quoted above), who had experienced three crisis pregnancies with two different women and said he was relieved about the two abortions and the miscarriage, suffering no long-term effects. A 27-year-old urban professional who grew up in a provincial town, Leonard spoke of the confusion and sense of powerlessness he felt at the time of the abortions; yet he never developed a responsible contraceptive practice. Prior to the research interview, he had never discussed his sexuality, sexual behaviour, contraception or the abortions with any one other than the women involved.

Leonard related an adolescence of competitive, conquest masculinity, where the fear of not proving your manhood and heterosexuality was being seen as a "wall-flower". He lost his virginity at 15, when drunk at a party. He did not use any contraception and was very worried until he knew the woman was not pregnant. From this time, the physical pleasures of sex - rather than any emotional connection - seem to have been his driving force. He became very sexually active, but only used condoms on a fitful basis. If used at all, they

were as much if not more to maintain sexual health as to avoid conception. During the interview he was surprised to find himself speaking about getting "crabs", because of his awkwardness about being open about such personal issues for the first time ever.

Well, like, I wouldn't, put it this way - if I went out and just met somebody in a nightclub who was talking to me, you know, and I was drinking and all that and went back to her place or my place, whatever, and didn't have condoms and we were going to have sex I probably would have sex. Probably now, it's just, more than likely, you know. I don't really mean to sound that callous, like, well, you'd be thinking more about yourself, like, you don't want to be taking home any souvenirs. I know you don't want to go and get some girl pregnant, whether she's a stranger or a girl you're going out with. But if you meet some girl in a nightclub and you're home the next day and you never see the girl again, you're just, you're probably more worried about yourself, to be honest.

(27-year-old professional)

Leonard experienced a number of pregnancy scares and three unplanned pregnancies but still has never developed a (fully) responsible contraceptive practice. Two crisis pregnancies were with the same long-term girlfriend, the first of which ended in miscarriage, the second in an abortion; the third, within a much more casual relationship, also ended in an abortion that he paid for before they, too, split up. With the first pregnancy he seemed to accept that he was going to become a father, but never told anyone about it because his girlfriend didn't want him to. In fact, he recognised during the interview that we were the first people he had ever spoken with about this pregnancy.

Leonard paid for the second abortion and accompanied his girlfriend to England for it. He demonstrated procreative responsibility in that sense. His self-perceived role in crisis pregnancy was an entitlement to be included in the negotiation about the pregnancy outcome - but on condition that he did not have to express his feelings or wants in the process. He also demonstrated another element in some men's deferring of procreative responsibility in the decision-making. While it could be argued that he was being protective of the woman in not pushing his agenda at this time, it seems equally likely that he wanted to leave her with the ultimate responsibility about whether to have an abortion or not.

I said to her, I said, 'I can't put it [time] back but, like, what do you want to do?' ... I waited for her to say it first. In one way I didn't want to be forcing her into anything, and then second I would have wanted to see what she wanted to do, herself, do you know what I mean, without any influence from outside. I wanted to see what she was thinking. I didn't want the child, but if she said she wanted to keep it I would have gone ahead with it, do you know what I mean? But if she decided I would have went along with it, do you know what I mean, you know. It wasn't like the end of the world, you know. I don't mean it, like, with everything that had gone on, I'm just, like, I'm not ready for this, I don't want it.

(27-year-old professional)

Leonard considered that the decision to abort was a key to their growing apart and separation soon afterwards. He also describes the "depressed" feelings he experienced after the abortion.

To be honest with you, it was almost as if I was depressed, that's the way you know, I'd say it, that's what it was almost like for me - I had problems sleeping, I didn't want to go out without my friends, do you know what I mean? I don't think I was angry at all, just, I'd just spend as much time as I could on my own - that's the truth - away from her, to get away from the whole thing, you know. It was just, if you'd see her you were just reminded of the whole situation, you know. And it wasn't all of the time but it was a lot of the time.

(27-year-old professional)

His third crisis pregnancy and second abortion experience involved the woman presenting him with a fait accompli decision that she was terminating the pregnancy and basically expecting him to pay-up, which he did. He felt angry being closed out like that, even though he didn't want the child.

On foot of these experiences he seems cynical about women and does not trust one-night-stands. He was open that he still has unprotected sex when alcohol is taken and the opportunity arises, and he gave a vivid account of how procreative irresponsibility extends to strategising about how to avoid being found out by women on one-night-stands should they get pregnant. In going back to their place you are "planning your escape before you get there," to avoid waking up beside them, which he found an uncomfortable thought.

He remains unclear about many of his feelings, and has developed a coping strategy of doubting that he ever lost a child. But he also recognises the relief he felt following the abortion.

You see, I don't feel like I lost a child to be honest. That's just being brutally honest, I know I probably used, really deep feelings that I lost a child. You know, I wish it never happened; I really wish it never happened, but I don't feel any loss. I still don't feel like a life was lost. I don't know. Even now I'm still, I'm not too sure. To be honest with you, there was a sense of relief when the whole thing settled down.

(27-year-old professional)

He expressed no desire whatsoever to become a father for many years and expressed genuine surprise and even bewilderment at the number of men he knew who had become actively involved fathers. This conforms to the significant pattern of decisions to abort involving men who maintained a relatively traditional, inflexible view of fathers' and mothers' roles and what a 'family' consists of in terms of requiring two resident parents.

We might speculate further from this about the men in this sub-sample, like Leonard, whose behaviour can be characterised in terms of what in Chapter 3 we have called the 'hedonistic pattern'. As we have seen, these men did show some concern for the woman but were less likely to practise empathy, move beyond their own needs or learn from the

experience. They engaged in little or no critical reflection on their behaviour or issues of responsibility.

These findings show that some men were very emotionally involved in decision-making to have an abortion and/or in the abortion process, and they were deeply affected by it. However, because of the limitations of this small sub-sample of men who mostly came forward because they wanted to tell their story, this discussion should not be taken to mean that all men are so constructively involved. We cannot comment on the views or experiences of the full range of men with abortion experience, such as those, for instance, who may be completely indifferent to it. Other researchers have encountered similar problems, even those that have recruited relatively large numbers of men. Shostak et al. (1984), in their survey of 1,000 men who accompanied their partners to 30 abortion clinics in the US, point out that their study had little to say about men who *don't* accompany their partners and who are likely to be more embittered and less emotionally involved in the pregnancy and more indifferent to it, perhaps. As Marsiglio suggests, 'Although many men are upset by their partner's abortion, at least for a brief period of time, many others are indifferent to their partner's abortion. Some men are simply relieved that they do not have to assume any social or financial responsibilities' (Marsiglio 1998: p92).

In summary, for men who do care an unwanted pregnancy is often felt as a crisis because they wish to take some responsibility for resolving it alongside the woman. For these men, the silencing of their own emotions and desires at such a time of crisis and beyond can create a risk to their mental health and well-being. Men's responses to the abortion cannot be seen in isolation from a range of other factors, such as distress at the relationship ending, the degree of shame they feel from the social pressure imposed by way abortion is stigmatised, their pattern of sexual practice and morality and their psychological history.

Men who respond in an isolated way can suffer the burden of the shame and confusion from the unplanned and apparently unwanted pregnancy, and the guilt and self-recrimination for maintaining silence and failing to articulate their feelings at the time of the abortion decision, or since. Unsupported, confused men presumably aren't good for women either, as they only add to the negative effects of the crisis already experienced by the woman. It is not that we can say with any certainty that the decision to terminate the pregnancy would have been different had the men been more open with respect to their own feelings and wishes. It may or may not have been. The point is that men should be facilitated to talk about their feelings when their partner is unexpectedly pregnant, and men (and women) should be encouraged to get family support if possible, and to feel confident to express their feelings and seek professional help where this seems necessary.

Yet as we have seen, men have an ambivalent relationship at best to seeking outside help in crisis pregnancy situations, and service agencies may have ambivalent attitudes to men. For the most part, although often confused and sometimes distressed, the men tended to know little about crisis pregnancy and pre- and post-abortion services, and in what they did know about them perceived them as being 'women's services'. Because some men commit to keeping the abortion secret and not even telling a close friend or relative, breaking through this kind of closure around the secret is a challenging task.

While the findings have shown that counselling does not appear to suit all such men, promoting access to counselling services has an important role to helping men with decision-making and their confusion and distress at the time of the crisis, and to possible healing and moving on after the abortion. But more than this, such interventions may enable men to become more responsible. Very possibly, men not feeling they had someone to talk to and think things through with contributed to the failure by some to develop responsible sexual practices. It seems that without an opportunity to talk about and make sense of the crisis and unplanned and unwanted pregnancy, some men just keep on making very dangerous mistakes. Without an impetus to critical self-reflection, the adoption of a more thorough-going definition of procreative responsibility, which includes attention to self-responsibility, as well as to the needs of the woman and child, becomes very difficult for some men to achieve.

6.6 What the research process suggests about men in crisis pregnancy situations

As we have emphasised throughout, this sub-sample of men with abortion experience probably provides a biased picture because most of them volunteered to take part in the study. Yet it is important to reflect not only on the research findings, but also on what we might learn from the research process itself about men's needs in crisis pregnancy situations.

At the outset of the research we had little real idea what kind of response we would get to recruiting men with crisis pregnancy experience. To take account of this uncertainty, we set our sights low in terms of target numbers (10). The fact that we eventually recruited 30 men with experience of unplanned pregnancies, 19 of whom defined the pregnancy as a crisis, says something about the possible scale of the problem and men's desire to talk about it. We say this even in the knowledge that, as we have acknowledged throughout this report, this sample is biased by the fact that those who assisted us with recruitment of men knew that we were interested in crisis pregnancy and probably more such men came forward than one might expect to find in a representative sample of men in the population.

On the other hand, we suspect that whatever success that we did have in being able to recruit men and get them to take the risk of talking about their most intimate experiences was because of how proactive we were in recruiting them - although this study is by no means unique in that regard (see, for instance, Frosh, Phoenix and Pattman 2002, Maycock and Byrne 2004, Murphy-Lawless et al. 2004, Hyde and Howlett 2004). Moreover, the majority of the men in the study said that they found the interview useful and that they had learned something important about themselves and their lives from the process of self-reflection involved. A key lesson, perhaps, is that Irish culture generally does not encourage or provide opportunities for men to talk about their sexuality and experience, and if men feel there is somewhere safe for them to go to discuss and deal with their experiences some, at least, will take it up. The fact that we were a first opportunity to talk for some of the men with crisis pregnancy experience reflects the depth of fear about the pregnancy, the secrecy the couple tend to commit to, and the men's perception that there was nowhere for them to go to get the necessary counselling and support during and after a crisis pregnancy situation. Men could benefit from a dedicated service that they could trust to understand and meet their needs. This should not be interpreted as us advocating completely separate services for men. On the

contrary, in this study decisions about how to manage a crisis pregnancy were negotiated for the most part between the man and woman and often also included extended family members, most usually the maternal grandparents, especially grandmothers.

There is an important agenda for action around changing and going beyond stereotypes of men as unreachable and emotionally unavailable. This perception leads to men being neglected in their emotional turmoil, because they are believed to be unwilling or unable to share their feelings. Many men internalise this belief and act accordingly. But as this study shows, when men do take the risk of coming forward they are well able to express themselves emotionally and articulate their experience and needs (see also, Frosh et al. 2002). Men could benefit from a dedicated pre- and post-crisis pregnancy/abortion service in the context of an integrated package of services that address the needs of all those involved, both individually and collectively, at key stages in the crisis pregnancy decision-making process and its aftermath.

Other research has identified the need both to develop services that are sensitive to boys' and men's needs and to evaluate what works in this area. Fullerton (2004: p40) argues that 'Consideration should be given to researching the information and service needs of young men', and we would extend this recommendation to men of all ages. Our experience of this research suggests that there are important methodological issues to be addressed about how men need to be worked with when they do come forward, and there is a need for a systematic review of work that has gone on internationally with men in this area. In short, men need to feel listened to, empathised with, and to feel that they have value in their own right and that their voices deserve to be heard.

6.7 Conclusions and implications for policy and practice

We recognise that the number of men in our sub-sample who had direct experience of an abortion is small and that the manner in which we recruited them might well have biased the sample in favour of men who wished to tell their story. Taking this bias into account and avoiding extrapolating the findings to all men, it is clear that some men do play a key role in negotiating crisis pregnancies with the woman that lead to abortions.

- The invisibility of men in public discourse about crisis pregnancy situations needs to change. While women's position at the centre of crisis pregnancies must be maintained, men need to be *named* in policy and practice discourses as actors for whom unplanned/unwanted pregnancies are also often a crisis.

Some men experienced the abortion as having positive and negative consequences, often at the same time. Even where men regard the decision to have the abortion as the right decision under the circumstances - and all in this study did - men can experience a range of feelings, such as shame, sadness and guilt. Equally, some came to really value and appreciate the learning and opportunity to become focused in planning successful, enjoyable lives the abortion gave them.

Some men, like women, need emotional support and help to clarify their wishes at the time of the crisis pregnancy decision-making. Some men are also likely to benefit from post-abortion counselling.

- We recommend that pre- and post-abortion counselling be made available to men, irrespective of their ability to pay.
- We recommend that services that respond to crisis pregnancies must be promoted as open to and inclusive of men - unless this is inappropriate.
- Men could benefit from a dedicated pre- and post-crisis pregnancy/abortion service in the context of an integrated package of services which address the needs of all those involved, both individually and collectively, at key different stages in the crisis pregnancy decision-making process and its aftermath.
- As well as addressing the needs of men (as well as women), services need to provide couple and family work to assist in the kind of negotiations and planning that the research suggests need to happen around such things as: the definition of active fatherhood; the possibilities for flexible organisation of the new 'family'; the role of grandparents and extended family in providing possible support should the pregnancy go full term; the implications of an abortion for the man as well as the woman.
- We recommend that the CPA commission a follow-up study, which will provide a systematic review of the international literature and projects providing men-centred services connected to prevention and sex education, and pre- and post-abortion counselling - which replicates for this issue and group Fullerton's (2004) study of younger people. A key focus should be on methodological issues in terms of 'what works' in engaging men, keeping them in services and helping them to develop their procreative responsibilities.
- We recommend that a full-scale follow-up study dedicated solely to men's experiences of abortion be commissioned.

7.0 Summary of recommendations

- Detailed functional information about sex and how pregnancy occurs, and about sexuality and the workings of the male and female body and fertility, should be provided to boys and men.
- Great care is needed in the choice of language used in sex and relationship education, mentoring and work with boys and men. Language needs to be as behaviourally specific as possible in naming the sexual and contraceptive practices in question. Terms such as 'safe sex' should be avoided because they mean different things to different men, and the actual 'safe' practices should be spelled out. Men in this study were well able to cope with such directness.
- Meaningful information needs to be given about intimate relationships, responsibility, preventing pregnancy and sexual health - approaches should deal head on with men's fears, uncertainties and vulnerabilities and should be grounded in the realities of men's active sex lives today.
- Boys need to be educated about sex much earlier than is currently happening. Sex education programmes need to be fully developed in primary schools and their effectiveness evaluated.
- Teenage men's peer groups need to be worked with in a way that promotes procreative awareness, responsible contraceptive practice, sexual health, respect for women and careful drinking and drug use.
- Parents need support in communicating with their children/young adults about sexuality and responsible contraceptive practice. Services to support parents (counselling, training, helplines, websites), strategically targeting fathers as well as mothers, should be developed in such a way as to give services the knowledge and confidence to engage with and support boys' and young men's sense of themselves as procreative beings.
- Safe contraceptive practice and sexual health campaigns should be rolled out to reach the entire population.
- Action should be taken on homophobia and bullying in schools, sports clubs, and other contexts where young men meet. The aim should be to develop an awareness and tolerance of the variety of ways there are of being a man and expressing male sexuality.
- Condoms should be made widely available free of charge, preferably from dispensing machines.
- Policy and practice need to be framed in a manner that underlines the importance of condom use beginning before actual sexual contact has been initiated.
- Because some men don't change their sexual risk-taking, even following a pregnancy scare or unplanned pregnancy, attempts should be made to directly engage with boys

and men about potential or real pregnancy scares and unplanned fatherhood, so that the possibility for the scare to become a turning point in the man's life where he adopts a more disciplined contraceptive practice can be advanced.

- Preventative educational and social programmes need to be developed that engage directly with younger men by challenging and supporting them to reflect on the possible outcomes of unprotected sexual behaviour and the implications of the various decisions they would have to make if (or when) presented with the prospect of unplanned fatherhood.
- Policy and practice need to take full account of the different pathways that men take on entering adulthood in the expression of their (hetero)sexuality. Men's (hetero)sexual and contraceptive practices can be categorised into 4 types, or patterns of sexuality and masculinity:
 - Hedonistic pattern: Chronically irresponsible, narcissistic pleasure-seekers.
 - Steady pattern: Irregular sex and limited risk-takers who are essentially responsible.
 - Impulsive pattern: Sexually active, generally responsible, but occasional risk-taking.
 - Safe pattern: Sexually active no risk-takers who are always responsible.
- The key challenges are to prevent the hedonistic pattern taking shape and to get men to break it when it does become their sexual pathway of choice. Reckless sexual hedonism arises in part because young men acquire - and some carry into adulthood - a 'conquest masculinity' and the irresponsible contraceptive and procreative practices associated with it. At its broadest this will require changing the attitudes, behaviours and relations of power and homophobia that equate legitimate male sexuality with compulsory heterosexuality and a requirement that men prove their manhood by having sex.
- Boys and girls need to be educated from an early age to understand that sexuality and masculinity take many forms and all should be accepted as equally valid.
- Strategic efforts need to be made to get men to acknowledge and learn from potential turning points such as pregnancy scares in a manner that leads to the adoption of a safe pattern.
- Policy and practice need to recognise the fact that some men play a key role in negotiating decisions about how crisis pregnancies are managed.
- Policy and practice need to recognise the importance of new ways of negotiating responsible parenting, enabling young men and women to see the choices they have to create 'post-traditional' families - such as living apart and sharing care - and the consequent lifelong responsibilities that such choices will entail.
- In having the key role they often perform in crisis pregnancies that go full-term recognised, grandparents (and especially grandmothers) need to be supported - financially as well as socially - by the State and others.

- The invisibility of men in public discourse about crisis pregnancy situations needs to change. While women's position at the centre of crisis pregnancies must be maintained, men need to be *named* in policy and practice discourses as key actors for whom unplanned and unwanted pregnancies are also often a crisis.
- Pre- and post-abortion counselling needs to be widely available to men, irrespective of their ability to pay.
- Services that respond to crisis pregnancies must be promoted as open to and inclusive of men - unless this is inappropriate.
- As well as addressing the needs of men (and women), an integrated package of services needs to provide couple and family work to assist in the kind of negotiations and planning that the research suggests often happen around such things as: the definition of active fatherhood; the possibilities for flexible organisation of the new 'family'; the role of grandparents and extended family in providing possible support should the pregnancy go full term; the implications of an abortion for the man as well as for the woman.
- We recommend the establishment of a pilot project, which will provide counselling services that are strategically inclusive of men involved in a crisis pregnancy. The pilot project should be fully evaluated to establish issues of best practice, methodology and effectiveness.
- We recommend that the CPA commission a follow-up study, which will provide a systematic review of the international literature and projects providing men-centred services connected to prevention and sex education, and pre- and post-abortion counselling. A key focus should be on methodological issues in terms of 'what works' in engaging men, keeping them in services and helping them to develop their procreative responsibilities.
- We recommend that further research should be carried out into the hedonistic pattern of sexual practice, its formation and ways of moving men away from it into the safe pattern.
- We recommend that a full-scale follow-up study dedicated solely to men's experiences of abortion be commissioned.

8.0 References

- Adler, N.E., David, H.P., Major, B.N., Roth, S.H., Russo, N.F. and Wyatt, G.E., (1992) 'Psychological Factors in Abortion: A review', *American Psychologist*, 47, 10, pp. 1194-1204.
- Armstrong, B. (2003), "The young men's clinic: addressing men's reproductive health and responsibilities." In *Perspectives on Sexual and Reproductive Health*. Vol. 35, No. 5 September/ October.
- Arthur, J (1997), 'Psychological after-Effects of Abortion: the Real Story' in *The Humanist Magazine* (New York), March/ April 1997 (Vol. 57, No. 2).
- Barker, G. (1998), Boys in the hood, boys in the bairro: Exploratory research on masculinity, fatherhood and attitudes toward women among low income young men in Chicago, USA, and Rio de Janeiro, Brazil. Paper presented at IUSSP/CENEP Seminar on Men, Family Formation and Reproduction. Buenos Aires, May.
- Boyle, M. (2002), 'Reflections on abortion and psychology: the hidden issues', *The Psychologist*, Vol. 15, pp. 502-503
- Carlson, D. (1991), 'Conflict and Change in the Discourse on Sexuality Education' in *Educational Theory*, Vol. 41. pp. 343-359.
- Clapton, G. (2003), *Birth Fathers and their Adoption Experiences*. London, Jessica Kingsley Publishers Ltd.
- Clare, A. (2000), *On Men, Masculinity in Crisis*. London, Chatto & Windus.
- Cleary, A. (2005) Ed., Masculinities, special issue of the *Irish Journal of Sociology*
- Connell, R. W. (1983), *Men's bodies' in Which Way is Up?* Sydney. Allen & Unwin.
- Connell, R. W. (1987), *Gender and Power*. Cambridge, Polity Press.
- Connell, R. W. (1995), *Masculinities*. Cambridge, Polity Press.
- Connell, R. W.(2000), *The Men and The Boys*. Cambridge, Polity Press.
- Dempsey, M., J. Heslin and C. Bradley. (2001), 'The experience of teenage pregnancy in the south east of Ireland.' Report submitted to South Eastern Health Board.
- Ferguson, H. (1998), 'Working with men and masculinities', *Feedback: Journal of the Family Therapy Association of Ireland*, Vol. 8, no. 1.
- Ferguson, H. (2001), 'Men and Masculinities in Late-modern Ireland.' In B. Pease and K. Pringle (eds), *A Man's world?* London. New York, Zed Books.

Ferguson, H. and F. Hogan (2004). *Strengthening Families Through Fathers: Developing policy and practice in relation to vulnerable fathers and their families*. Dublin, Department of Social Community and Family Affairs.

Frosh, S., Phoenix, A. and Pattman, R. (2002), *Young Masculinities: Understanding Boys in Contemporary Society*. London. New York: Palgrave.

Fullerton, D. (2004), *Promoting Positive Adolescent Sexual Health and Preventing Teenage Pregnancy - a Review of Recent Effectiveness Research*, Dublin: Crisis Pregnancy Agency.

Furstenberg, F. (1995), "Fathering In the inner city: parenting participation and public policy." In Marsiglio, W, (ed) *Fatherhood, Contemporary Theory, Research and Social Policy*. London, Sage Publications.

Giddens, A. (1991), *Modernity and Self Identity; Self and Society in the Late Modern Age*. Cambridge, Polity Press.

Giddens, A. (1994), 'Living in a post-traditional order', in U. Beck, A. Giddens and S. Lash, *Reflexive Modernization*, Cambridge: Polity.

Hogan, F. (1998), "Soulful Storytelling with men an invitation to intimacy," in *Men in Therapy*. (ed.) F. Hogan. Special edition, *Feedback: the Journal of the Family Therapy Association of Ireland*, vol.8. no.1.

Holmberg, L.I., and Wahlberg, V. (2000), The process of decision -making on abortion: a grounded theory study of young men in Sweden. *Journal of Adolescent Health*, 26, 230 -234.

Hyde, A. and Howlett, E. (2004), *Understanding Teenage Sexuality in Ireland*, Dublin: Crisis Pregnancy Agency.

Inglis, T. (1998 a) (rev.ed), *Moral Monopoly: The Rise and Fall of the Catholic Church in Ireland*. Dublin. University College Dublin Press.

Inglis, T. (1998 b), *Lessons in Irish Sexuality*. Dublin. University College Dublin Press.

Inglis, T. (2003), *Truth, Power and Lies: Irish society and the case of the Kerry babies*. Dublin. University College Dublin Press.

Kaufman, M. (1997), The Construction of Masculinity and the Triad of Men's Violence, in L. O'Toole, and J. R. Schiffman (eds), *Gender Violence*, New York: New York University Press.

Kearney, J., S.-A. Mansson, et al. (2000), *Fatherhood and Masculinities, a comparative study of the realities of fatherhood and masculinity in Britain and Sweden*. Sunderland, University of Sunderland: 56.

Kimmel, M. (1990), *Men Confront Pornography*, Crown Publishers

Kimmel, M. (1994), Masculinity as homophobia: fear, shame and silence in the construction of masculinity, in H. Brod and M. Kaufman (eds), *Theorizing Masculinities*, Thousand Oaks, CA: Sage.

Landry, D. J. and Camelo, T.M. (1994), Young unmarried men and women discuss men's role in contraceptive practice. *Family Planning Perspectives*, 26 (5), 222 -227.

Mahon, E., C. Conlon and Dillon, L. (1998) *Women and Crisis Pregnancy*. The Stationary Office, Government Publications, Dublin.

Major, B., Cozzarelli, C., and Testa, M. (1992), Male partners' appraisals of undesired pregnancy and abortion: Implications for women's adjustment to abortion, *Journal of Applied Social Psychology*, 22, 599-614.

Major, B. (2003), 'Psychological implications of abortion - highly charged and rife with misleading research'. In *Canadian Medical Association Journal*. Volume 168(10), pp. 1257-1258

Marsiglio, W. (1998), *Procreative Man*. New York and London, New York University Press.

Marsiglio, W., S. Hutchinson and M. Cohan. (2001), "Young Men's Procreative Identity: Becoming Aware, Being Aware, and Being Responsible." *Journal of Marital and Family Therapy* 63: 123-135.

Marsiglio, W. and S. Hutchinson (2002). *Sex, Men and Babies, Stories of Awareness and Responsibility*. New York and London, New York University Press.

Maycock, P. and Byrne, T. (2004), *A Study of Sexual Health Issues, Attitudes and Behaviours, The Views of Early School Leavers*, Dublin: Crisis Pregnancy Agency.

McKeown, K., Ferguson, H. and .Rooney, D. (1998), *Changing Fathers? Fatherhood and Family Life in Modern Ireland*, Cork: Collins Press.

Milner, J. (1996), 'Men's Resistance to Social Workers', in B. Fawcett et al, eds, *Violence and Gender Relations: Theories and Interventions*, London: Sage.

Morrell, R. (1998), Don't let the fear cut you off from people you care about: Boys, men and questions of masculinity in South Africa, *UNESCO Conference on Adult Education and Population Issues*, Havana, Cuba.

Morris, L. A. (1996), *The Heterosexual Male: Lust in his loins, sin in his soul?*, New York: Sage.

Murphy-Lawless, J., Oaks, L. and Brady, C. (2004), *Understanding how sexually active women think about fertility, sex and motherhood*, Dublin: Crisis Pregnancy Agency.

Ndong, I., Becker, R.M., Haws, J.M., and Wengner, M.N. (1999), Men's reproductive health: Defining, designing and delivering services, *International Family Planning Perspectives*, 25.

- O'Brien, M. (1981), *The Politics of Reproduction*. London, Routledge and Kegan Paul.
- O'Connor, P. (1998), *Emerging Voices: Women in Contemporary Irish Society*, Dublin: Institute of Public Affairs.
- O'Hagan, K. (1997), 'The Problem of Engaging Men in Child Protection Work', *British Journal of Social Work*, vol 27, pp 25-42.
- Plummer, K. (2004), Male sexualities, in M. Kimmel, J.Hearn and R.W. Connell, eds., *Handbook of Studies on Men and Masculinities*, Thousand Oaks, CA: Sage.
- Posavac, E.J; Miller, T.Q. (1990), 'Some problems caused by not having a conceptual foundation for research: An illustration from studies of the psychological effects of abortion'. In *Psychology & Health*. Volume 5(1), pp. 13-23
- Real, T. (1997), *I don't want to talk about it: Overcoming the secret legacy of male depression*. Dublin. Gill & Macmillan Ltd.
- Redmond, M.A., (1985), Attitude of adolescent males toward adolescent pregnancy and fatherhood. *Family Relations*, 34, 337-342.
- Reisen, C., and Poppen, P.(1995), College women and condom use: Importance of partner relationship. *Journal of Applied Social Psychology*, 25, 1485 - 1498.
- The Psychological Society of Ireland (1992), *Abortion: Social Context and Psychological Consequences*, The Psychological Society of Ireland, Dublin: October, 1992.
- Russo, N.F. (2001), 'Abortion and Mental Health: Understanding the Relationship', pp. 31-38 in *Psychological sequelae of abortion- the myths and the scientific facts*. Symposium Inselspital, Bern , Switzerland, 2001.
- Shostak, A.B., McLouth, G. and Seng, L. (1984), *Men and Abortion: Lessons, Losses, and Love*, New York: Praeger.
- Schwalbe, M. and M. Wolkomir (2002), 'Interviewing Men'. *Handbook of interview research: Context and method*. J. F. Gubruim and J. A. Holstein, Thousand Oaks, CA: Sage: 203-219.
- Strauss, A. (1969), Turning points in identity. In *Mirrors and masks: Transformations of identity* (pp. 92-100). New York. Macmillan
- Weeks, J., Holland, J. and Waites, M (2002), *Sexualities and Society: A Reader*, Cambridge: Polity Press.
- Winnicott, D.W. (1957), *The Child and the Outside World*. Studies in developing relationships. London. Tavistock Publications Ltd.
- Yamey, G. (1999), Sexual and reproductive health: what about boys and men? *British Medical Journal*, 319: 1315-6

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