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Negotiating masculinities in times of crisis

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Title: Negotiating masculinities in times of crisis: On the COVID frontline in Pakistan

Abstract:

This paper provides a detailed analysis of the ways in which male Pakistani civil servants negotiated their masculinity while working as frontline workers during the COVID-19 pandemic. We show how these men, in high-pressure work environments, invoked multiple hegemonic and non-hegemonic manifestations of masculinities as they experienced extreme stress. We contribute to the existing hegemonic masculinity literature by illuminating the ways in which different types of masculinities can be performed, embodied and disrupted in high-stress situations. We also explore the processes by which these different types of masculinities are negotiated in a Global South context allowing us to examine how masculinity is contested in a context with particular cultural and societal norms and expectations.

Keywords: hegemonic masculinity, non-hegemonic masculinity, stress, Global South, COVID

1.0 INTRODUCTION

The ways in which crises cause extreme occupational stress across a myriad of professional fields (Monteiro et al., 2016; Brown and Campbell, 1990; Brooks et al., 2019) and trigger other socio-psychological responses such as emotional exhaustion (Caldas et al., 2021), depression (Hammen, 2005), fatigue (van der Ploeg et al., 2003), and diminished productivity (Gates et al., 2011) are well-documented. However, this literature offers limited insight into the relationships between crises and gender in general, and masculinity in particular. Furthermore, whilst recent studies have emphasised the instrumental role played by public servants in times of crises, including the COVID-19 pandemic (Kauzya & Niland, 2020; Schuster et al., 2020), little has been said about how they are forced to grapple with the exigencies of the pandemic on a personal level. Even less is known about how men in the Global South have experienced pressures of performing masculinity during times of crisis, including during the current pandemic.

The lack of insight is particularly problematic because the adverse impact of COVID-19 has been extreme in the Global South, notably South Asia (e.g., Carmody et al., 2020; Bhutta et al., 2020; Rasul et al., 2021), including Pakistan, the focus of our study. The United Nations has listed Pakistan as among the twenty countries in the world that are most vulnerable to the pandemic (Jensen & Molina, 2020). Consequently, the purpose of our paper is to examine how masculinity is confronted and negotiated during the COVID crisis in Pakistan.

Our research offers empirical insight into how male public servants in Pakistan grappled with extreme work-related pressures during the COVID-19 pandemic, and how this was complicated by the ways in which masculinity is performed, negotiated and disrupted in a Global South context. While we know that the pandemic has had a disproportionately negative

impact on women (Özkazanç-Pan & Pullen, 2020), the impact of the crisis on the formation and negotiation of masculine identities has received very little attention (Alcadipani, 2020).

Pakistan offers valuable insights into how masculinities are performed, embodied and suppressed in high stress situations because of prevailing patriarchal norms and culturally embedded expectations surrounding appropriate gender behaviour. Further, while existing literature has documented the institutionalisation of societal control over the bodies and livelihood of Pakistani women as well as the cultural barriers constraining ability to access justice, space and health (e.g., Khan, 2018; Maqsood, 2017; Shah, 2016; Shahid, 2010; Saeed, 2001), the effects of patriarchal norms on the ways in which masculinities are defined, performed and negotiated remain relatively underexplored.

Our paper contributes to the literature by providing insight into how different types of masculinities are performed, embodied and suppressed in high-stress situations. We show how men in high-pressure work environments negotiated and invoked multiple hegemonic and non-hegemonic manifestations of masculinities, often simultaneously, and sometimes at the risk of compounding already elevated stress levels. It also addresses questions exploring the processes by which these different types of masculinities are negotiated in Pakistan, allowing us to examine how masculinity is contested in a context with specific cultural and societal norms and expectations.

2.0 LITERATURE REVIEW

2.1 Defining and embodying hegemonic masculinity

Connell (1995: p.77) defined hegemonic masculinity as a “configuration of gender practice which embodies the currently accepted answer to the problem of the legitimacy of patriarchy, which guarantees (or is taken to guarantee) the dominant position of men and the subordination of women.” Hegemonic masculinity is therefore conceptualised primarily in terms of its

normativity – representing the most prevalent and most revered way of being a man in a given context at a given time, prescribing all other men and women to position themselves accordingly and legitimating the pervasive disparity between men and women (Connell and Messerschmidt, 2005; p. 832).

According to Connell (1987), hegemonic masculinities are constructed in relation to women and other subordinated or alternative masculinities. These non-hegemonic masculinities are typically classified into four types: *complicit* masculinities, which do not bear the same characteristics as hegemonic masculinity, yet benefit from the unequal gender relations and help implicitly sustain hegemonic masculinity; *subordinate* masculinities, “constructed as lesser than or aberrant and deviant to hegemonic masculinity, such as effeminate men” (Messerschmidt, 2019: p. 86); *marginalised* masculinities, that are non-hegemonic because of the interplay of social inequalities other than gender, for example, race, ethnicity, and class; and *protest* masculinities, “constructed as compensatory hypermasculinities that are formed in reaction to social positions lacking economic and political power” (Messerschmidt, 2019: p. 87). Other work has pointed to progressive masculinity types that account for men with more liberal dispositions towards gender equality. Categories such as egalitarian masculinity types (Lamont, 2015: p.289), centred on men who may “express solidarity with feminists”, challenge the idea that women need to be confined to the household and try to distance themselves from the hypermasculine prototypes of overbearing, stoic and promiscuous men.

Insight into strategies employed to resist, negotiate and overcome the patterns and norms associated with hegemonic masculinity remains relatively scarce. Perez and Sasson-Levy’s (2015) study about the active and voluntary avoidance of military service by young Israeli males is one of the few exceptions that shows how the ideals and patterns of hegemonic masculinity can become destabilised and deinstitutionalised. Whilst this particular study chronicles the evolution of resistance processes that became evident during adolescence and

gradually culminate into an active decision not to serve, a critical investigation into other less known pathways that translate into a partial or complete disruption of masculinity frameworks merits further analysis. Deeper insights into the processes by which the parameters used to define masculinity ideals become partially disrupted and thereby paving the way for the complete dismantling or denunciation of these ideals can be instrumental in working towards the implementation of similar strategies that can redress not only gender inequalities but also masculine stereotypes.

Research examining hegemonic masculinity has traditionally emphasised the importance of the body as a key benchmark for a masculine prototype. Skilled bodily activity or body practices demonstrating superior levels of strength and stamina, such as the ability to work long hours, are repeatedly affirmed as desirable (Berdahl et al., 2018). The persistence of macho attitudes and neglect of the body and health within the construction industry (Hanna et al; 2020), the positive correlation between physical toughness and masculinity (McCreary, Saucer & Courtenay, 2005), and the processes and social constraints by which masculinity is defined and disrupted in terms of the body in the sporting industry (Connell, 1990) are examples of empirical studies exploring the role of the body in enacting masculinity in line with dominant societal norms. However, the mechanics by which different types of hegemonic and non-hegemonic masculinities may become disrupted or reinforced in terms of the body require further investigation so as to explicate the role of the body in reifying or disrupting the hegemonic ideals associated with physical masculinity during crisis management.

It is important to note that the conceptualisation of these theoretical ideas centred on masculinity, including hegemonic masculinity and its multiple iterations, can predominantly be attributed to scholarship originating out of the Global North. Much of this literature has been tested against empirical cases and sites also situated in developed, predominantly Anglophone, nations (Chopra et al., 2004). Research dedicated to masculinity work in the Global South and

specifically South Asia is notably missing or underrepresented in prevailing conversations on masculinity (Chakraborty, 2014). Even less is known about masculinity work specifically in the context of Pakistan. The limited research dedicated to this particular context has also predominantly conflated Pakistani masculinities with Muslim masculinities and there too the lens is largely focused on experiences of Pakistani (Muslim) migrants located in Global North (Dwyer et al., 2008; Hopkins, 2006; Blell, 2018). Those evaluations of indigenous masculinity performances within Pakistan have predominantly analysed masculinities within niche rubrics of religion (Aslam, 2014), social media (Salam, 2021) and men's perception of women and their own sexuality (Walle, 2004); very little attention has been accorded to the ways in which masculinities become transformed, upended and reinstitutionalised in situations of crisis and stress.

2.2 Men's experiences of stress during crises

Stress is typically conceptualised in terms of psychological and physiological reactions to negative or emotionally demanding external stimuli (Kurtz, 2008: p. 218; Liberman et al., 2002). Existing research has considered the interplay of stress with several demographic variables including age (Rudolph and Hammen, 2003), ethnicity (Miller and Travers, 2005), and class (Nomaguchi and Johnson, 2016). Gender differences are particularly important parameters used to assess variations in levels of stress and reactions to stressful events (Kurtz, 2008; Zuckerman, 1989). Research exploring the gendered dimensions of stress has demonstrated a tendency amongst men to engage in coping mechanisms that are compliant with hegemonic understandings of masculinity (Dyson & Renk, 2006; Li et al., 2006). As Addis and Mahalik (2003: 12) contend, men, regardless of age, ethnicity, and social background, are less likely than women to seek help for physical or mental health issues. These findings support the statistical evidence provided by the American Psychological Association (APA, 2011) that indicate men are less likely than women to deliberately partake in stress-

coping activities such as reading (32 percent vs 51 percent), spending leisure time with family or friends (32 percent vs. 44 percent), or consulting a mental health professional (1 percent vs. 5 percent). Furthermore, men are also less likely than women to acknowledge that stress has a “strong or very strong” impact on an individual’s health (78 percent vs. 88 percent); unsurprisingly, men are significantly more likely than women to report having been diagnosed with chronic stress-related illnesses such as high blood pressure (32 percent vs. 23 percent), heart disease or heart attack (6 percent vs. 2 percent) and type 2 diabetes (12 percent vs. 7 percent). In light of these statistics, it is particularly important to further understand the ways in which men are impacted by, and attempt to cope with, situations of extreme stress. While our understanding of this in all contexts is extremely limited, it is particularly so in the Global South. This contextual-specific understanding is important because different regions have different cultural mores, norms and expectations. An excellent example of this is Pakistan.

3.0 METHODS

i. Research Context

As per the Global Gender Gap Index Report (2020), Pakistan ranks 151 out of 153 countries in terms of gender equity (World Economic Forum, 2019). Gender norms and expectations are both culturally and institutionally regulated, translating into gaping gender disparities and intransigent customs defining appropriate masculine and feminine behaviours. These norms are particularly dire and often extreme in the research context of this study, namely the province of Khyber Pakhtunkhwa (KPK). Previously known as the North West Frontier Province, KPK is bounded to the west by Afghanistan with which it has similarities in language, cultural norms and traditions. The Pashtun culture of KPK has tended to emphasise gender norms that are relatively conservative, tradition-bound and male dominated (Naz et al., 2011). The defining feature of Pashtun societies is the *Pashtunwali* – a moral and cultural code of conduct that

defines the Pashtun as a man of honour (*ghairat*), and holds him to a certain standard in conducting his affairs, whether tribal, social, or national (Khan, 2006: p. 368). As Khan (2006) postulates, the very term “Pashtun” is often culturally held synonymous with “man of honour” whose ‘life is spent guarding his family’s name and honour, even amidst extreme adversity’ (p. 368). While some scholars have asserted that the *Pashtunwali* is a ‘philosophy of life’ or a moral system that draws on tenets relating to social welfare, justice, equality and humanism, the code itself has become corrupted by hyper-masculine displays of power, including “honour killing”, giving away girls in marriage to resolve disputes (*swara*), and forcibly marrying off women without consent (*ghag*) (Shinwari, 2020).

In KPK, as elsewhere in Pakistan, COVID-19 has had a dire impact. Whilst many parts of the world have implemented vaccination programmes that have significantly reduced fatality rates, most countries in the Global South are continuing to experience multiple waves of the virus. Pakistan has recorded 1, 275, 158 confirmed cases of COVID-19 with 28, 496 deaths (World Health Organization, 2021). It is important to highlight that these are the ‘confirmed’ figures, with several experts and news sources claiming that actual numbers are likely to be much higher due to significantly low testing rates (e.g., Junaidi, 2021; Kermani, 2020). With approximately 20% of the population fully vaccinated at the time of writing (Reuters, 2021), the lack of vaccine access, inadequate healthcare infrastructure, and a general vaccine hesitancy suggests that Pakistan will be confronted by crisis conditions for the foreseeable future (Hashim, 2021).

The participants of this study, Moeen and Ali, are male civil servants currently stationed in the province of KPK and directly involved in the delivery of essential public services, including COVID-19 testing and vaccination efforts. It is important to note that while both participants are currently working in KPK, Moeen and Ali hail from relatively more liberal and urban parts

of the largest province in the country, Punjab. Both have received western educations and were required to move to KPK because of their jobs.

ii. Participant recruitment and data collection

A qualitative mode of inquiry was necessitated by the need for in-depth insight and understanding of the attitudes, emotions and lived experiences of our participants (Denzin and Lincoln, 2017). Interviews were held online via Skype and WhatsApp over April and May 2020 in the first instance and then follow-up questions were asked via telephone and in person during September 2021. The participants were identified by means of purposive sampling by the authors and which entailed recruiting “information rich” participants who were male, working in the public sector, and serving in front-line roles responding to COVID-19 (Patton, 2002; Hennink et al., 2020).

Moeen, a district administration official, is responsible for implementing pandemic-related practices put in place by national and local public bodies. These include monitoring isolation wards of COVID-19 patients housed in specific medical sites, supervising COVID-19 testing, and geo-tagging positive test cases within a municipal District. Moeen is also responsible for formulating the lockdown strategy within his District and, more recently, overseeing the roll out of the COVID-19 vaccination programme. Ali, a policeman, is in charge of upholding law and order. In addition to carrying out regular police work, he has had additional responsibilities for the implementation and enforcing of COVID-19 protocols. Focusing on two participants allowed us to collect deep and detailed insights rather than gather more superficial understanding from a broader range of workers.

iii) Data Analysis

The interviews were held in both Urdu and English. They were recorded, transcribed and translated into English by the first author and a third-party translator who had access to one of

the participants. The first author, a Pakistani native with an in-depth understanding of the context, then coded the interviews with emergent themes discussed, assessed and classified by both authors. Initially, open coding resulted in the identification of themes such as anxiety, extreme workload and stress. This process of open coding was followed by multiple rounds of axial coding to further refine, align and continually compare the themes identified in the first round and to also reveal potential linkages between the open codes. For example, “extreme stress”, “concealment of emotions” and “inability to vent” were categorised into second-order themes such as “internalisation of stress” and “physical entrapment”. We finalised this process of data sifting and analysis by the use of selective coding which enabled us to ‘select and integrate categories of organised data from axial coding’ and draw relevant theoretical inferences about changes to masculine behaviour precipitated by stress and crisis. (Williams & Moser, 2019: p. 52). Selective coding allowed us to further draw linkages and identify patterns across the multiple themes that emerged.

4.0 FINDINGS

Four main themes emerged as important in how masculinity was being enacted by frontline workers during the pandemic: an expectation of significantly longer working hours; the physical and emotional toll of these extended hours and crisis-related work; a perceived necessity to conceal feelings and states of exhaustion from others; and a recognised need to “man up” in response to the crisis. As these themes are presented below, we heavily utilise the voices of the participants.

4.1 Expectation of Extended Working Hours

A major stressor confronting the participants of this study was the expectation that they unquestioningly engage in long working hours during the pandemic:

Ali: The police department [normally] works around eight to ten hours [per shift], but during these last four months with COVID-19, the entire constabulary has been performing duties for more than 14 hours. From early morning to late night, around 11 p.m., we are stationed on roads or other duty points to ensure the implementation of the SOPs [standard operating practices]. ... Our working hours have increased.

Moeen: When I started this position - last January when there was no COVID – general working hours were 9 to 6, 9 to 7pm. I noticed... [from] March onwards... and when things got really, really serious in April... we had no more [specific] working hours. For example, I still remember when the first case popped up in my district ... I received the report of the first death at exactly 4 in the morning, and I knew that I had to wake up at 4 a.m. and manage the funeral because it had to be according to the SOPs...Our cases were rising. On average [I was working] not less than fourteen to sixteen [hours]. On some days, I have worked straight for eighteen hours as well – and working means that I was properly working in the office, in the field. No [I never took any breaks], not at all. During COVID, on some days my condition was such that I couldn't sleep for a good two to three hours in a go.

Moeen also commented on how the fallout from this routine has been exacerbated by the fact that pandemic has “dragged on” for so long:

Moeen: When the pandemic started...so during the first wave...there was the shock element certainly, but at least we also had the energy and the passion and more importantly the mental strength [to cope with the pressures] of the crisis. Over time with the 2nd, 3rd and now the 4th waves, the novelty of the pandemic and the disease has waned but the pressure, tension, work hours and work load have sustained. Perhaps they have even gotten worse because at least with the first wave we were in complete lockdown. In a way we were only dealing with the pandemic and nothing else – in this last wave, it's a hotchpotch. COVID is carrying on, life has resumed as normal, and you have to run the district as normal also. Hence, obviously it has become too exhausting – there is no stability, there is no respite and now...in fact for quite a while now, I would say I am literally living and carrying on in a state of burnout. And this burnout has become the norm, but my body and my mind is yet to recognise this as the “new normal”.

4.2 Physical entrapment and mental stress

The physical and mental costs of performing these masculine ideals and extreme work hours became increasingly challenging for Moeen and Ali. They reported high levels of physical exhaustion and emotional stress precipitated by the long work hours and difficult working conditions during the pandemic. The masochistic ‘pride’ in performing masculinity norms and ideals is subverted by the intensity of the workload and emotional fallout of having to deal with death and illness at such close quarters:

Ali: [There's a]...physical burnout in the sense that.....if you aren't exercising or meeting your friends to unwind – you're not happy. It affects your personality, emotionally and physically. Obviously, you have to unwind yourself because of the work pressure you are facing every day. But everything is affected by Corona. I haven't been able to meet my friends for months. We were even taking precautions when interacting with our family. In this way, we have truly experienced physical burnout.

Moeen: It was definitely physical [burnout], but the emotional aspect intensified it. The physical burnout started immediately – after two or three weeks your body starts getting exhausted. When it was coupled with emotional stress, it was difficult. I am generally a very calm individual, but obviously when there's so much stress...at one point you just break. And breaking depends on the situation. One can lash out, one can make rash decisions as well. You're not thinking very calmly. Obviously I felt bad. I felt bad. I felt bad. In one incident, I even apologised to the person later.

Ali also commented on how a lack of awareness and an overall casual attitude towards COVID-19 amongst people especially in rural or conservative areas of the province compounded his stress:

Ali: Being a public officer, I have to constantly meet people not just in official meetings but also when I go out especially say in a rural area where they have no regard for COVID-19 SOP's...for example, some people just come to you and hug you or shake your hand and you can't [turn them away] because it is rude in this culture to refuse a hug or a hand shake. This is a major source of stress for me. And I'm constantly on edge, because after meeting all these people you come home and bring all those germs and possibly the disease to your family. It's very challenging.

4.3 Internalising stress – concealment and suppression

The delegitimation of hegemonic masculinity ideals did not translate into an active overhaul or confrontation of accepted ways of being. Moeen and Ali instead chose to internalise and suppress the psychological stresses incurred at the workplace:

Ali: I personally like to conceal all these things because everybody is going through the same thing. At the cost of your reputation, even if you attempt to express these feelings, the person you're talking to is also facing the same issues. Discussing something repeatedly also brings in the element of self-obsession. So, I feel a lot better if I conceal it. In fact, to be honest, I don't even share much about my work life with my family.

The stigma associated with mental health also acted as a barrier in adequately addressing mental health concerns. Ali for instance argued that he does not consider therapy an option because of the cultural discomfort associated with it:

Ali: Look firstly in Pakistan we don't really have a culture of going to a therapist. Normally people think that if you go to a psychologist you are completely crazy. We don't have that trend here. The only coping mechanism we have is that we share with our friends or close ones...in fact when you absolutely must go to a psychologist the most you can do is that you go to a friend who can [secretly] get you in touch with a therapist he personally knows or happens to know how to deal with such "issues" and ask him to help you secretly.

The coping strategy was therefore one of active concealment and suppression with discussion of any stress considered a sign of weakness. For Moeen similarly, the choice was clear – bottling one's emotions is a better alternative than 'burdening' loved ones:

Moeen: We were dealing with COVID and this pandemic in a way that we were exposed to some horrible and ugly sights. From morning to evening, we're seeing deaths. From morning to evening, we're seeing patients. We were dealing with a lot of emotional trauma as well, and we did not want to vent out this trauma to somebody, tell them, and shift this onto them. I did not want to shift this entire thing. We've seen a very bad side of the whole pandemic and I did not want to share it with my family or my friends, so I just kept it to myself and obviously that is very taxing – it exhausts you even more.

However, Moeen recognised the cost of concealment and questioned the validity of this coping mechanism. In doing so, he is pushing back against the parameters by which masculinity is defined in Pakistan.

Moeen: [Not] expressing ourselves or expressing our issues is not related to COVID. Generally, whenever we meet, sit down, vent out, we talk about different things – not necessarily our stresses and everything. You want to feel good when you're sitting down and talking, not share or discuss how there are issues in our life and there are so many stresses we are dealing with. We don't share it. I don't know if it's a male thing or what, but we don't. I guess, yes, because generally – we have ideals and impressions, and generally, females are good in this, and as males we lack this trait. Theoretically, it's good to vent out – it clears your mind, it clears your emotions – but the way we have been brought up, it's not something that is instilled in us.

Moeen felt able to implicitly contest the criterion used to determine masculinity in this cultural context because of the stress that he experienced. This blurring of the boundary conditions of different masculinity types can be attributed to the anomalies of frontline work during COVID-19 that caused an exploration and distortion of the ideals underlying these types and classifications. Moeen also argued that the inability to vent to the family in particular had a lot to do with "shielding" and "protecting" them from the horrors of their jobs on the frontline.

According to him, any display of vulnerability would not only “weaken” him in his own eyes but would also entail transferring his own stress to his family members:

Moeen: When you are leading a team, you can’t show your weakness and act all scared. You are in charge of so many teams working on the ground [administering vaccines, getting tests done, etc.] and following your orders...you can’t get act all weak and vulnerable, it would be extremely demoralising for them, who are literally out there on your orders.

4.4 Lack of coping strategies– ‘We have to do it’

The “effeminisation” of sharing, venting or even seeking help to redress the emotional, psychological and physical fallout from working extreme hours, reinforces the sustained continuance of masculinity norms in this context. The deep entrenchment of hegemonic masculinity ideals not only hinders the processes of disruption but also exacerbates the psychological and emotional distress, as Moeen described:

Moeen: In the beginning, there were times obviously when you started taking a lot of stress and it becomes a problem. I tried a few things – for example, I tried including a little exercise in my routine, or I tried writing it out if I needed to vent...I did actually consider [going to a therapist], but firstly it was not physically possible for me to go and get professional help, and secondly I did not feel like sharing...I did not feel like I could – maybe it was culturally, but I did not feel like going to someone, even if it’s a psychiatrist, and talk about how I’m feeling. I didn’t like the thought of it. [So we always have to] ... appear strong, and we are trained like we have to deal with issues in a manly manner. We have to deal with it like, whatever the situation is, we have to do it.

As evident in Moeen’s narration, there is a conscious understanding about how problematic it is to suppress feelings of despair and yet there is an insurmountable hesitancy to seek help. Dealing with crises in a “manly manner” seems the prudent option because of the almost immutable status of hegemonic masculinity prototypes in the Pakistani cultural context. Stressful conditions only minimally disrupted these ideals. Moeen reflected on the specific cultural exigencies of the KPK society where he serves, and argued that the unique socio-cultural aspects of this society have further hardened him to the prospect of showing weakness, breaking down or even seeking help:

Moeen: Look you also have to see where you live, and the culture surrounding you. The societal norms of KPK are not exactly the same as say Punjab's...so subconsciously or indirectly you internalise those rules. I may not be from this province, I may not have grown up here...but I live here now. So I can't [be weak] – this society really values a very different and very hyper form of masculinity, which also impacts me. Professionally, I have to ascribe to their idea of masculinity...maybe I shouldn't [theoretically] speaking, but you sometimes have to. Sometimes I also find myself subconsciously assimilating these norms on the personal level. That's what your living environment can do to you. Like I said before, the stress, exhaustion, burnout...it has been too much, but I am adamant that why should I consult a professional. I don't want to be weak or seen as weak...and I will be considered really weak and not exactly a strong enough man if anybody finds out that I am breaking down.

Ali echoed Moeen's opinion and also professed not feeling particularly comfortable in seeking help or sharing his burdens due to the prevailing stigma associated with conversations around mental health as well as a punctuated lack of awareness surrounding COVID-19 and its implications for psychological well-being that he has observed in the local Pashtun culture:

Ali: There isn't much literacy here and overall you will find a tribal culture here. There are a lot of villages here and a [village-like] culture. There isn't a trend to go to a doctor and discuss your mental stresses with [mental health specialists]. There is a firm belief that all their [tensions] are from God and only God with help them. So most things are left to God. So of course...if you compare this area and [its culture] to say Punjab or a major metropolis in Pakistan, there you will find a culture to seek therapy in times of stress. But over here in KPK...especially where I am stationed, they don't believe in all this. In fact they don't even believe in COVID or that it exists [let alone the emotional and mental implications of the disease].

5.0 Discussion and Conclusion

Along with the host of unprecedented challenges brought about by the pandemic, COVID-19 has accentuated the pervasive fault lines of inequality (Bapuji et al., 2020). Women are experiencing burnout because of the disproportionate burden of the pandemic in domestic *and* professional settings (Aldossari and Chaudhry, 2020). However, as we show here, some men in particular occupations and locales have also been heavily impacted in ways that reveal insights into the construction and negotiation of particular expressions of masculinity.

In recounting their experiences of working in situations of extreme stress, the participants of this study demonstrated a range of implicit and explicit male gender expectations and pressures

that guided their behavioral responses to situations of crisis. These findings entail pervasive implications for the binary gender roles and expectations about culturally acceptable masculine behavior that help define the contours of the patriarchal society in Pakistan. The assumption that men can cope with dramatically extended working hours without additional support is indicative of a society that expects men to conform to certain stoic and physically super-human stereotypes. By working long hours and often trivialising it, male participants are cementing hegemonic masculinity norms that correlate long hours with resilience and stamina (Williams, 2013). As Cooper (2000: p. 383) notes in her research about Silicon Valley knowledge workers, “Successful enactment of masculinity involves displaying one’s exhaustion, physically and verbally, in order to convey the depth of one’s commitment, stamina, and virility”. This is apparently even more pronounced in our context in Pakistan with the ‘ideal prototype’ of masculinity prescribing the male role as rational, fearless, aggressive and impassive (Jafar, 2005). Societal pressures within this context impel men to conform to the culturally acceptable standards and prototypes of masculinity (Salam, 2021: p. 38). The pandemic could not disrupt these ideals; in fact, it provided an opportunity to demonstrate adherence to a more accentuated, extreme understanding of how a male should be during crisis.

The role of the body in positively reinforcing these hegemonic ideals of physical masculinity thus emerged as a defining characteristic of crisis management in our study. Internalising stress, working long hours and failing to relieve the mental and physical symptoms of highly taxing routines can be interpreted as strategies used to adhere to culturally appropriate standards of masculinity. Strong physicality is considered to be a defining code of masculine honour across the Asian subcontinent (Khan et al., 2014), though some places, such as the KPK, have an even more extreme understanding of what this requires. Traditional sources have explicated this honour code in terms of a man’s ability to inflict violence and possess physical prowess adequate enough to ‘command, control, and possess his land, money and women’ (Chowdhry,

2015: p.12). Our analysis extends this understanding of male honour by implicating the role of the body when confronted and coping with crisis situations. By overextending their physical capability to withstand extreme stress and work-related pressure, Moeen and Ali both reinforce and redraw the boundaries associated with male honour and virility. Male honour in this context is not to be construed in the traditional sense of professing the physical ability to (violently) exert control over and safeguard external subjects such as one's property or (particularly female) family members. Instead, honour is preserved and upheld in the overexertion of the body and by rejecting or ignoring cues of cognitive and emotional trauma, such as the inability to sleep, lashing out at others, and so on. Existing literature, especially in the South Asian context, has typically studied honour vis-à-vis the female body in that honour 'is thought to reside primarily, but not exclusively, in the bodies of women and is maintained through female chastity, virtue, and subdued body language, dress, and demeanour' (George, 2006: p: 37; Dube, 1988). We extend this understanding by delineating the ways in which honour becomes embodied and internalised by men specifically during times of stress.

The constant pressures to internalise the pressures of work, the inability to share their stress with colleagues or family members, and the refusal to seek professional psychological help are all emblematic of the tacit pressure to conform to the hegemonic norm of dealing with stress. The pressure to conform to this prototype is obdurate to the extent that any infraction is regarded as nothing less than a violation of the mainstream cultural rubric. The participants' refusal to seek mental health support or help of any kind therefore also qualifies as a strategy geared towards affirming autonomy over their bodies and safeguarding their honour. Highly stressful situations therefore also problematise the delineations used to define male honour, which is upheld and regulated by means of the male body as it weathers high levels of physical and mental stress.

Honour is also implicated in the boundary work that dichotomises family from public life. The reluctance to vent or share problems with family or friends demonstrates the need to clearly demarcate strict boundaries separating the “family” from one’s professional life and problems. Domestic domains in the South Asian context are defined primarily as female spaces that are veiled from the distinctly more “masculine” public and professional spheres ‘by a series of practices that enable and enhance tropes of invisibility’ (Chopra, 2006: p. 156-157). In the Pakistani context specifically, traditional and conservative masculinity ideals, task men with not only the responsibility of financially providing for the family but also to preserve the honour, status, morality and safety of these domestic domains and by extension the larger society (UNDP, 2010). Honour, therefore, extends beyond the individual.

The male participants in this study are seen to be shielding the “family” from the pressures of their job and consider it a form of duty to internalise the stresses encountered at the workplace. Admitting the weakening of the mental and physical faculties before one’s family is analogous to failing to perform the principal obligation of protecting the family. Therefore while the attitudes of South Asian men towards mental health services and specifically their reluctance to seek help are well-documented (Bhui et al., 2002; de Visser et al., 2020; Soorkia et al., 2011), we provide insight into the implications of this for the institutionalisation of traditional hegemonic masculine ideals such as family, regional and even national honour. In doing so, our research further substantiates and extends existing hypotheses about individual honour becoming subsumed with religious, family or caste honour (George, 2006: p. 37). Whilst existing scholarship documents the honour-maintaining strategies, wielded by families and communities to coerce men and women to conform to culturally-sanctioned gender norms and behaviour (Oldenberg, 2002; Ram, 1991), these strategies are typically discussed with respect to women. Examples of such strategies are also centered on the deliberate constraining of women’s movements, opportunities, and general freedoms to preserve honour at the micro – a

man's individual honour – meso – family – and macro – community, caste – levels. Our research extends this conversation beyond the female body and shifts the lens inwards, onto the male body specifically, that becomes the primary site for honour-work. In doing so this study not only amplifies the role of the male body but also that of crisis situations and crisis-induced stress, which propel and facilitate this internalisation of honour by the male body. This further amplifies the effects and prominence of the traditional and even hyper masculinity types and ideals.

Pakistan qualifies as what Gelfand et al. (2013: p. 499) termed a “tight society”, governed by stringent norms, low gender egalitarianism and tightly-controlled “monitoring systems to detect deviations which are severely punished”. This rigid surveillance of culturally-appropriate masculine behaviour is even more pronounced in the Pashtun society where our participants are situated. The fact that the participants in this study are not Pashtuns provides a reflective aspect that reveals how individuals are pressured to conform to the societal expectations that surround them. By attributing changes in masculine performances during times of crisis to unique contextual exigencies, our study acknowledges the plurality of masculinity as a social construct that ‘emerges at the intersection of caste, religion, class, sexuality, gender’ (Gopinath & Sundar, 2020: p.1). The interplay of hegemonic socio-cultural apparatuses and hierarchies in tempering interpretations surrounding appropriate masculine behaviours substantiates existing theoretical claims about masculinity as a social construct that is always constructed in tandem with and relation ‘to other individuals in particular spaces and social settings’ (Gopinath & Sundar, 2020: p.1; West & Zimmerman, 1987).

Our participants' experiences also extend this conceptualisation by showcasing the blurring of boundaries between the non-hegemonic and alternative types of masculinities that deviate from the conventional standards associated with hegemonic masculinity. For example, the internalisation of stress and inability to share the burden of emotional stress whilst being

cognisant of the unfairness of this internalisation can be interpreted as a simultaneous interplay of the complicit and even progressive masculinity types. Thus, whilst participants attempted to power through the crisis while abstaining from seeking help, there was also a conscious appreciation of how problematic this approach was. This is exemplified by Moeen critiquing the institutionalised expectations of what is considered to be culturally appropriate masculine behavior. He expressed his weariness about imposed gender norms and his explicit discomfort with conforming to these norms, therefore signaling a progressive masculinity type. Yet ironically he chose to participate in and reinforce the typical characteristics of hegemonic masculinity himself and thereby professed the qualities associated with complicit masculinity types whereby men implicitly sustain hegemonic masculinity tenets or abstain from actively challenging or defying them, not as previous research has established, because of the benefits they reap from maintaining the status quo (Gómez, 2007; Connell, 1995), but rather from a perceived need to protect individual, family, regional and national codes of honour. Therefore, whilst there is no intention of embodying a hegemonic masculine ideal, the participants only distance themselves and decry the gendered norms surrounding masculinity *to an extent*. In doing so, they oscillate between non-hegemonic masculinity types such as complicit or more egalitarian versions of masculinities, whereby they both contest the ideals of hegemonic masculinity yet do not seek to overturn or actively defy the parameters of this masculine paradigm.

The boundary conditions of the complicit masculinity type also become distended, in that the participants' complicity is guided predominantly by contextual pressures and expectations as opposed to self-serving objectives. Existing literature has predominantly attributed complicit masculine behavior to the fact that men benefit in some way from sustaining the status quo and therefore choose to complicitly and implicitly further hegemonic masculinity ideals (Messerschmidt, 2019). Our study demonstrates that alternative factors, which may or may not

be specific to empirical contexts such as KPK or Pakistan, play an instrumental role in informing the type and degree of complicit masculine behavior in play. In this case, the willingness of the participants to ascribe to hegemonic masculinity ideals is dictated primarily by a cultural context that reprimands any deviant, non-compliant masculine behavior. This sense of fear of the potential admonishment that could follow explicitly disruptive behavior also ensures a partial and fragmented attainment of progressive masculinity ideals. This restricted and incomplete disruption of hegemonic masculinity ideals echoes Lamont's (2015) argument that progressive and egalitarian masculinities not only fail to overhaul existing inequalities and hegemonic ideals but to insidiously perpetuate them.

Similarly, whilst these participants continuously negotiate the pressures of institutionalised masculinity norms, there is also a partial and sporadic display of characteristics that cannot *per se* be classified under subordinate or effeminate masculinity but that are antithetical to more hyper-masculine types. By acknowledging the adverse impact of emotional stress on physical health, strategising about coping mechanisms, such as exercise, therapy, or diet, and accepting the unfairness of expected and supposedly "masculine" behaviors, the participants in this study demonstrate a hybrid form of masculinity that pans across different forms of hegemonic and non-hegemonic masculinity classifications.

Masculinities and interpretations about the 'correct way' to perform masculinity therefore become problematised during times of crisis. Male frontline workers in this case study demonstrated the ability to delegitimise and challenge the established boundary conditions of hegemonic and non-hegemonic masculinity classifications as they grappled with the pressures of the pandemic in Pakistan and their own expectations on how they should perform. However, this disruption was only partial in the absence of any purposive action to deinstitutionalise societal hegemonic ideals and norms. We thus see an acute awareness amongst the participants about how they have been conditioned to internalise the characteristics associated with

hegemonic masculinity. It is, however, their ability to tacitly defy and disrupt these institutionalised norms and transcend the boundaries delineating the different classifications of hegemonic and non-hegemonic masculinities that is particularly interesting. Stress plays an integral role in facilitating these processes of disruption. By uncovering the mechanisms and processes by which frontline workers in a particular cultural context negotiate with entrenched and institutionalised norms of the different types of masculinity, our study contributes to the existing frameworks of hegemonic masculinity by revealing how gender expectations and interpretations are complicated and negotiated during a time of crisis in a Global South community.

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