



Who Will Be Able To Take Care Of Me? Men And Tasks Of Care; A Reflection From The Social.

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ABSTRACT

Activities related to caring for people in situations of vulnerability constitute a growing job occupation. The participation of men in this task is more and more frequent, allowing them experiences related to affectivity and work at home, which are silenced by the social mandate that governs the behavior of what has been categorized as masculinity; although caregivers can be considered to have symbolically broken gender stereotypes by engaging in these actions, it does not mean that they detach themselves from the position of superiority that the patriarchal system grants them. This document reflects theoretically on the immersion of men in tasks that involve caring for people, considering the symbolic presence of power that generates a resistance to be cared for by otherness, but a permissiveness to be caregivers.

Keywords: gender, masculinity, caregivers, power and emerging practices

As a start

The economic, legal, and labor dynamics of the 21st century have generated changes in the social structure, making it necessary to reflect on the ways in which people relate to meet their particular and community objectives. One of these changes is the presence of men in settings traditionally occupied by women or in jobs socially intended for them, such as activities that involve caring for others.

Public policies that deal with human reproduction, morbidity, mortality and physical well-being have directly impacted the population pyramid in the world¹ because life expectancy has increased and birth rates have been controlled; this causes the population to require special attention in education, nutrition, physical activation, occupation and/or emotional support, so that they live the stages of their development with the highest quality possible, especially if the subject is in a vulnerable situation, such as having a disability or a physical illness, or being in childhood or adulthood; these needs increase the demand for people destined for health care.

The fragmentation of the social structure caused by the post-industrial era and the new socioeconomic order of neoliberal capitalism (Pinilla, 2017), as well as social and economic processes, such as the fight against violence, dissemination and respect for human rights, the recognition of women in the professional field and the changing labor landscape have pushed men to participate in the reorganization of domestic work and childcare, in the restructuring of work dynamics and in the establishment of interpersonal relationships. However, "in terms of changes in cultural attitudes about domestic work, women are the ones who change first and then make – or try – to make their men change" (Gutmann, 2000, pp. 228-229).

Regardless of age, social status, sexual orientation, profession, and work occupation, men are becoming increasingly involved in this reality, experiencing a variety of situations as diverse as masculinities themselves. Some men have chosen to be single, with or without children, while others have formed families, also with or without children. Some decide to continue living with their parents or move away, while others rebuild their families after a divorce or widowhood.

There are also those who stay at home to do household chores, either by personal or mutual decision with their partner, or because low-paid work or unemployment has forced them into this role.

¹ Fertility rates, increased longevity and international migration are factors that affect population growth; According to the UN (2020), this dynamic shows a decrease in fertility in countries where large families still predominate, a slight growth in countries where the average fertility is less than two children per woman, and increased chances of survival in all countries. In Latin America and the Caribbean, growth is slowing and the population is aging, that is, there are fewer children and more older adults (ECLAC, 2020).

Whatever the story, there are more and more men who play the role of caregivers, whether for sons and daughters, parents, or any other family member or friend. Some even pursue professional careers in care-related fields, such as nursing and physical rehabilitation.

In this sense, caregiving implies affective experiences with the caregiver and makes possible a frequent approach to the sensitive side inherent to every human being; Therefore, this paper will consider caregiving as an emerging practice for masculinity, which debates the hegemonic model with which men are still educated in a rigid patriarchal structure, from which they are socialized to exercise, in the words of Conway, Bourque & Scott (1996), more prestigious professions, such as engineering, law and scientific research, as opposed to teaching, nursing and social work, destined for women, in an archaic separation of occupations based on sex and/or gender.

However, the fact that there is an increasing presence of men in caregiving tasks does not erase this boundary in the exercise of work, because "the gender basis in occupational identities is remarkably durable and is not easily modified by the increase of women or men in a given occupational group" (Conway, Bourque & Scott, 1996, p. 30). Moreover, because it is mostly performed in a private and symbolically confining space, and is mostly not an activity with economic remuneration, being a caregiver is an activity little recognized and valued in, among and by males (Comas d'Argemir, 2016; Figueroa & Flores, 2012; Vaquiro & Stiepovich, 2010; Larrañaga, Martín, Bacigalupe, Begiristáin, Valderrama & Arregi, 2008).

Therefore, what is the relationship between the social construction of masculinity and the caregiving tasks performed by men? It is interesting to explore the activity of caregiving as an emerging practice for what has been categorized as masculinity, based on theoretical reflections from the social perspective on the immersion of men in a scenario of affectivity linked to femininity.

The validity of inequality

In the debate on social reality and power relations between subjects in contemporary times, gender continues as an analytical category that is taken as a point of reference to explore the subjectivity of sexually constructed corporeal units. According to Scott (1996), "gender is a constitutive element of social relations based on the differences that distinguish the sexes, and is a primary form of significant power relations" (p. 289), which means the attribution of control of one gender over the other in a dichotomous scenario, where only two identities are recognized in opposition: the masculine and the feminine, social constructions of inequality by establishing the dominance of men against the subordination of women.

"In this way, the binary opposition and the social process of gender relations are part of the meaning of power itself; questioning or altering any of its aspects threatens the totality of the system" (Scott, 1996, pp. 299-300); in this respect, the incorporation of males in scenarios that are not very closely linked to masculinity implies symbolically altering this system as well as questioning the power structures associated with patriarchy.

In the case of males, the social construction of masculinity is maintained under a rigid model lacking imagination, freedom and emotional development, being socialized as people who must comply with the social prescriptions of gender; despite being called to be diverse, "they are subject to a gender system that pressures, limits and regulates them, and imposes on them ways of being and being in the world" (Jiménez & Figueroa, 2014, p.176).

Physical or emotional control is promoted among them, the maintenance of an appearance of strength and independence, as well as the performance of aggressive behaviors, physical dominance and/or exposure to risk (Almanza and Gómez, 2017); socialization processes turn males into cold, rational, violent, providers, generally excluded from other possibilities (Jiménez & Figueroa, 2014), denying weakness, pain and discomfort. They learn to dissociate themselves from sensations, feelings and thoughts linked to inferiority (Sinay, 2001) and are linked to physical strength, aggressiveness, sexuality, lack of self-care and homophobia (Almanza & Gómez, 2017).

This hegemonic model of masculinity configures gender practices that embody the accepted response to the problem of the legitimization of patriarchy and seeks to guarantee the dominant position of men in the face of the subordination of women (Connell, 2003). By hegemony, a term analyzed by Gramsci, is understood "the political-ideological leadership that forges the social base for the conquest of political power and the construction of a new State" (Álbarez, 2016, p. 155), besides being an intellectual and moral leadership (Giacaglia, 2002); by its etymology it means to guide, to lead, to be in front, from which command and govern derive. Leading and being in front, being terms linked to masculinity, obliges those who identify with this gender to dominate, produce and guide in order to conquer and maintain power.

However, Rocha and Lozano (2014) state that:

In everyday life, not all men coincide in their practices, meanings, bodies and ways of relating with the dominant model. That is to say, there are many other voices that account for alternative conceptions of "being a man" and therefore it also becomes essential to account for this diversity, since many of these practices and experiences are excluded under the prevailing discourse, which allows talk about "masculinities" and not about a single male hegemony. (p.13)

The multidisciplinary views of the Social Sciences on the masculinity construct, specifically from gender studies², produce immense possibilities for reflection. Gender studies have their theoretical roots in the feminist movement (Núñez, 2016), from which a methodology has been developed that critically explores masculinity; according to Fernández (2014), this entails a commitment and a social struggle that translates into an analysis that leads to change. Doing research on masculinities to contribute to social transformation in favor of equality between men and women requires doing it from a gender perspective.

When we do gender studies of men and masculinities, we are doing research that addresses the way in which the sex-gender system (this system of ideologies and practices, personal and institutionalized, that act on the human body by defining sex, gender and desire, as well as their legitimate, natural, moral, healthy or beautiful forms of existence) operates in subjects defined from birth as male and in whom there is an expectation of masculine behavior. What interests us is, therefore, knowing the meaning processes that establish the masculine, masculinity and manhood in the various areas of the lives of subjects and society, with the consequence of configuring identities, subjectivities, practices, relationships. diverse social, including power and resistance relations between people and in the entire social body. (Núñez, 2016, p.27)

With the previous approach, it is possible to consider that there are men who question the hegemonic model imposed by patriarchal society, in favor of behavioral changes towards a more affective masculinity, free of impositions, in a framework of equality with their male and female peers; however, "changing not only implies the renunciation of rights acquired prediscursively, but also questioning their own habits, their identity, the image of themselves and of women" (Fernández, 2014, p.70), which leads to reflect on whether in reality men who question the mandates of male hegemony renounce the privileges that have been imposed on them since birth.

Castillo (2011) emphasizes the existence of alternative models of masculinity, which seek to establish egalitarian relationships with women and other men, respecting their diversity and difference; affirms that men who approach this trend are linked to the ability to create, build, mobilize, and produce life; establish democratic or loving relationships in which they demonstrate understanding, dialogue and search for consensus.

According to Montesinos (2005), it is possible to transform the traditional masculine model in response to cultural change, the emergence of feminine identities, the interaction between genders and the crisis of masculinity. The aim is to construct masculinities that are far removed from sexism, homophobia, racism and adultism, in order to make room for diversity. To do this, it is necessary for men to pamper their children, especially the boys, which would boost the sensitivity of both (Corneau, 1991); this would mean that women would no longer be obliged to provide sensitivity exclusively but would share this responsibility with men, especially since men also have bodies and beings need to be touched to maintain their balance and know that they exist.

Boscán (2006) concludes that a conception of masculinity different from the traditional one will be achieved and legitimized through consensus and implementation by women and men with coherent thinking, who together will be in charge of establishing political strategies for the construction of freer, open and plural masculinities.

In order to make visible the multiple experiences of constructing oneself as masculine, it is necessary to give voice to these alternations, not only of adults, but also of adolescents and those in old age; of those who live in rural, in semi-urban spaces and in urban areas; those who are from the West and the East, or those who are African, Asian and Latin; the indigenous, the indigent, those of countercultural groups and other social manifestations where the corporeal and subjective unity linked to masculinity is involved.

In all these experiences of masculinity, it is necessary to review the formation that males have to take control of the masculine, and if in the process of social construction of masculinity the hegemonic model is still in force or has given way to more egalitarian constructions, that is, of that masculinity that debates the hegemonic nature of the construct; even more than referring to non-hegemonic actions in masculinity, it is preferable to generate a conscious and responsible masculinity that represents the voluntary and committed renunciation of the social comforts of machismo (Pinilla, 2017).

However, in non-hegemonic practices for masculinity there is not a detachment of all the symbolic power granted by society because such an element is implicit in human relations and community relations, that is, "masculine efficacy lies in the fact that legitimizes a relationship of domination that is in itself a biologized social construction" (Jiménez & Figueroa, 2014, p.77). Thus, a father who, due to various circumstances, is

² Núñez (2016) suggests that gender studies of men and masculinities are historically and conceptually linked to feminist research and lesbian, gay, bisexual, transgender, transsexual and intersexual (LGBTI) studies, forming a larger system that They are gender studies, however, they do not always intersect because in each of these subfields it is possible to detect thematic, conceptual and political concerns that distinguish them, as well as crossovers, coincidences and diverse borrowings; clarifies that the object of analysis of gender studies of men and masculinities are the sociocultural and power dynamics that seek the inscription of the "man" or "masculine" gender and its reproduction/resistance/transformation in biologically male or female humans. socially men (in their bodies, identities, subjectivities, practices, relationships, products), as well as in social organization.

dedicated to household chores³, has the social configuration of power in front of his family and his community, because he is the man, and as such, the one who leads, the one who makes decisions, the one who builds, the one who provides (regardless of whether it is in and from the private space). An unemployed man, who appears invalid to other men because he does not comply with the social prescription in economic matters, has a greater symbol of power compared to a working woman, not because of the economic issue but because of her other privileges that make up for the lack, that is, physical strength and reproductive capacity.

Furthermore, if men continue immersed in a dynamic of hegemonic formation that develops in the social settings where they operate, such as the family, school and religious center, the precepts of the patriarchal system will continue to be transmitted to them: androcentrism, heteronormativity, phallocentrism and sexism, which requires men to be strong and productive in the public sphere, have the gift of command in decision-making and demonstrate their manhood through love conquests, sexual exploits and risky situations; in the words of Jiménez and Figueroa (2014), this obligation to show reproductive, sexual, social and fighting capacity in any circumstance becomes a burden for them.

Being involved in non-traditional scenarios or activities for masculinity opens up various possibilities for men, among them, the reproduction of behavioral patterns based on hegemony or the transformation of that hegemony into an empathetic and affective masculinity by questioning the element of power. Regardless of what happens, men maintain the privileges granted to them by society, because "the social order functions as an immense symbolic machine that tends to ratify the male domination on which it is based" (Bourdieu, 2012); the above evidences the need for critical reflection for the deconstruction and reconstruction of masculinity.

Power Splattered Alternation

As part of the social transformation in terms of gender, men have been called to pay attention to taking care of their health and put aside the idea that because they are men they can endure any ailment⁴, to participate in household and childrearing activities, defending their right to affection, and other actions that make them visible in plurality and in situations of tolerance and equality with respect to those who share any of the gender identities.

The internalization of these practices makes possible, on the one hand, the break with traditional gender stereotypes and roles, and on the other, the opening of scenarios for community development. It is enough to explore the labor field with which men put aside the ideas framed in a rigid division of labor based on sex, and with which they demonstrate that they have a wide and fertile field to develop their skills; thus, activities related to the home, protection of the body, cultivation of beauty, artistic practices and care for others allow them to function in the private and public spheres, to be productive and reproductive, as well as to be affective with themselves and with those around them.

It is up to men, located in the field of the exterior, the official, the public, the law, the dry, the high, the discontinuous, to carry out all the acts, at once brief, dangerous and spectacular, that, like the beheading of the ox, plowing or harvesting, not to mention homicide or war, mark breaks in the normal course of life; on the contrary, women, being located in the field of the internal, the humid, the bottom, the curve and the continuous, are assigned all domestic work, that is, private and hidden, practically invisible. or shameful, such as caring for children and animals, as well as all the outside tasks assigned to them by weeding and gardening), with milk, with wood, and especially the dirtiest, most monotonous and the most humble. (Bourdieu, 2012, p.45)

This sexual separation of labor, explained by Bourdieu (2012) based on the body, violates human dignity because while the upper part corresponds to the masculine, and its public and active uses -confronting, confronting, showing one's face, looking into the eyes, speaking publicly- are a monopoly of men, women must renounce the public use of their gaze and voice.

With the immersion of men in scenarios and activities considered socially feminine, there is a symbolic rupture in the sexual division of labor, but they are the subject of criticism from those who reject the transformation of gender relations. It is in these contexts, considered emerging, where men are required to analyze whether they

³ The fact that a man carries out socially feminized activities, such as housework, breaks with the traditional gender role for masculinity, because the symbol of power that the man represents is subordinated to a task that in no way reinforces the masculine identity that is wait for him; For the dissident culture of patriarchal hegemony, domestic work at home represents an emerging occupation and space for men, regardless of whether that work is paid or unpaid.

⁴ Work and remuneration are part of the construction of masculine identity, and it is reinforced by the role of provider that has historically been played in the family, therefore, the body is experienced as an instrument for these purposes (De Keijzer, 2006). Male mortality is associated with heart problems, certain types of cancer (lung and prostate), violent deaths (homicides, accidents and suicides) and addictions (especially alcoholism). De Keijzer (2016) suggests that men who do take care of their health have realized the costs of traditional male socialization; have been victims or witnesses of domestic violence and have been able to reflect on it, as well as on their own violent behavior; have had contact with positive male role models; They have lived with alternative peer groups (around culture, music or religion) or have become parents.

are shedding patriarchal privileges, because it is not only a matter of thinking it or saying it, despite the fact that the social structure maintains the label of superiority.

In the professionalized or non-professional work of a caregiver, there is the symbolic presence of power, since the caregiver is positioned as superior to the person who is the subject of care, because it would be understood that he or she has the knowledge and strength to care for someone who is vulnerable, who has lost the ability to take care of himself/herself.

When the dominated apply schemes to those who dominate them that are the product of domination, or, in other words, when their thoughts and perceptions are structured according to the very structures of the relationship of domination that has been imposed on them, their acts of knowledge are, inevitably, acts of recognition, of submission. (Bourdieu, 2012, p.26)

This means that the one who dominates the relationship is the one who is above, in front and active, that is, the masculine, while the person being cared for is the feminine part, the one below, the back and passive part; thus, the caregiver is constituted as the hegemonic part within a private and feminine scenario, which is the space where caregiving takes place.

If male caregivers rethink their masculine position towards one of equality with their male and female peers, and with those they care for, there is the possibility of modifying the symbol of power implicit in this relationship in caregiving, because it is not enough to think about not being hegemonic or getting involved in activities that are frequently carried out by women, but rather it is necessary to debate this hegemony, reconstruct masculinity and experience a more empathetic and egalitarian way of relating to others, even when the social structure remains in force in an exacerbated patriarchy.

There are men who would be obliged to be caregivers, either for their children or their parents, but some refuse to act as such because they claim to not have the capacity to do so or to not be used to it; however, behind this denial there is fear of being seen as female subjects, since care tasks are typical of women; thus, the worst humiliation for a man is to see himself turned into a woman or to be labeled homosexual (Bourdieu, 2012).

Whether paid or unpaid, formal or informal, care becomes a category of analysis due to the social impact it represents; every person needs to be cared for at any time in their life, so the figure of the caregiver represents power, superiority and capacity, since the well-being of the subject who is cared for will depend on him or her and is meant as a sign of vulnerability, disability and dependence to survive.

Caring is preferable to being cared for

By historical and cultural tradition, women are expected to be responsible for the care of others in parenting or in the face of an illness, disability or contingency; by professional and work profile, there is a greater presence of them in areas of nursing, daycare, physical rehabilitation and homes for the elderly; due to social gender prescription, women are destined to take care of children, partners and families.

As the family is expected to be the main provider of assistance and welfare, it is there where the role of women in care is naturalized and normalized as a social construction (Comas d'Argemir, 2016); in situations that violate the health of a member of the group, such as the presence of older adults, people with disabilities or sick people who demand a lot of attention during the recovery of health, the person caring for in 47% of cases is a family member, of whom of which, 89%, are women (Diez Minutos, 2017). It seems that by being the caregivers, greater and better care will be guaranteed to the family member or the person who requires support, due, among other factors, to the fact that women are linked to affectivity.

They are symbols par excellence of care, as opposed to men, who are educated for productivity, maintenance and protection. However, in this protective role socially established for men as part of their masculine identity, there is implicit a representation of care, which is not affective like that performed by women but care based on physical and monetary protection, a product of the strength and paid work that must be possessed.

Men must protect, care, but from the outside, from the external, from the public scene, with economic production that guarantees the satisfaction of basic needs of food, housing, health and clothing; it is a demonstrative form of masculinity to meet your partner, offspring and parents, figures associated with vulnerability.

Masculinity becomes hegemonic if other men appear in that protective role, since protecting another man gives him greater value by subordinating the men who depend on him. According to Connell (2003)⁵, the man who

⁵ Based on the practices and relationships that build the main patterns of masculinity in the Western gender order, Connell (2003) recognizes four types of relationships between the various masculinities: hegemonic, subordinate, complicit and marginalized. Hegemonic masculinity occupies the commanding position in social life, whose main characteristic is the success of its claim to authority; it is generally imposed on women, who symbolically represent subordination. When a man is in a position of inferiority to another, whether due to knowledge, social position, sexual preference, physical strength, number of sexual exploits and other factors of competition between men, it is considered subordinate masculinity. For their part, masculinities that are constructed in ways that take advantage of the dividend of patriarchy, without the tensions or risks that come with being at the forefront of patriarchy, are complicit masculinities. And those who are part of groups violated by social class, race or other rejection factors are considered marginalized masculinities.

cares would be the image of hegemonic masculinity, while the man who is cared for, protected or dependent, would represent subordinate masculinity.

This is one of the reasons why it is unlikely that men will allow themselves to be subjects of care, since such a position would represent a decrease in their hegemony in the social structure; They are educated to be strong, therefore, they should not show any sign of submission or weakness. The fact that they are cared for represents a dependency, and in that relationship they would be subordinate to the person who cares for them, who is probably a woman, but if the person who cares for them is a man, their opposition to being cared for would be greater because it would represent a symbolic decrease of his masculinity. In that logic, it is preferable to care than to be cared for.

Faced with an archaic model of sexual division of labor and an economic model in crisis, there are men who have found it necessary to become involved in caregiving activities, either because it represents a labor and economic activity, or, on the contrary, because of the savings involved in not hiring professional caregiving services.

The care crisis expresses the collapse in families caring capacities, as well as its impact on society. The labor and social participation of women, the lack of involvement of men in care, the fragmentation and breakdown of support networks and the insufficiency of public policies mean that families cannot absorb the growing care needs. (Comas d'Argemir, 2016, p.13)

Someone has to do care tasks, without distinction by sex or gender, since no one is exempt from caring, much less from having been cared for.

Care work implies taking responsibility for the health of another person, in an activity that connotes caution and care in action, associated with terms such as help, relief and protection, where those who are helpless and vulnerable are given support, it supports, protects and helps (Rivas & Ostigüín, 2010). The caregiver represents the resource, instrument and means by which specific and often specialized care is provided to the vulnerable person; the caregiver represents the resource, instrument and means by which specific and often specialized care is provided to the vulnerable person; this ability to care symbolically becomes a necessary power to sustain the health of the person who is subordinated to be cared for

Male resistance to caring

It has already been mentioned that in this activity the presence of women as caregivers predominates, in an evident panorama of feminization of work that stems from social gender prescriptions; the fact that there is a greater participation of women represents a scenario of inequalities that become injustices, among which are salary differences, no social security and the devaluation of the activity, combined with the negative consequences for health.

The increasing participation of men in this activity does not represent a relief for the workload that women have, because they are the ones who are more committed to the emotional relationship with the subject who is cared for; furthermore, male caregivers rarely collaborate in other household tasks, and they even decrease their participation as such when care demands increase (Crespo & López, 2008).

It is possible to affirm that the presence of men as caregivers opens the possibility of gradually reducing the gender gap in terms of participation in this scenario, especially if they work collaboratively to meet a need that increases with demographic growth and life expectancy; however, inequality between caregivers in economic remuneration or social security has become more evident.

When men take on care as much as women, they move closer to gender equality. And each family that opts for more egalitarian solutions has the possibility of transmitting these values to their sons and daughters based on their example. It is also a measure for gender equality, since women have more care needs than men and fewer resources to face them. (Comas d'Argemir, 2016, p.17)

The dynamics of support for people in vulnerable situations will depend entirely on how the family nucleus is constituted, how it is organized and the willingness to do so. Professional care services and those offered without being specialized in the area are options that the family has to provide support to those who require it. This reality takes on particularities depending on who needs the care. An infant may have a greater support network than an older adult, or a person with a disability may require more specialized care.

In the case of infants, the woman who becomes a mother is their first bond of love⁶, since she is the one who gestates, gives birth, breastfeeds, protects, constituting herself as the main caregiver; the man turned father would be the secondary caregiver. However, even when the father is present in the upbringing of the children, the female figure dominates the caregiving tasks, because when the mother needs help or is absent, other women come to her aid, such as the grandmother, sister, aunt, cousin, and less frequently, a male member of the family.

⁶ The bond of love between the child and the mother is an attachment that develops from conception, from which the mother protects the new being that lives in her body, and that extends beyond the stages in which the child is dependent on parents. For Bowlby (1986), attachment behavior is everything that allows the subject to achieve or maintain proximity with another differentiated person and generally considered stronger and/or wiser, typical of the human being, which motivates the search for proximity between the young child. and their parents or caregivers.

Regarding the care of people who are in adulthood, or who are already older adults (in both cases, with or without a disability or chronic degenerative disease), once again they are the ones who assist in this activity, even before than men. If it is a woman who is cared for, if she has a partner, it would be expected that that person would be responsible for the situation; If this is not the case, generally a female relative comes to take care of them, whether they are daughters, sisters, aunts, cousins, even the mother, or people who are not a direct relative who do so, such as the wives of their children or someone friend; male figures remain secondary, such as brothers, children and grandchildren. When the person being cared for is a man, it is expected that if he has a partner, it will be that partner who cares for him, or a direct family member such as daughters, sisters, cousins or nieces, even sons and brothers.

Regarding contracted care services, infants are generally left with female caregivers, and almost never, with male caregivers, mainly due to the fact that there is more female than male population dedicated to this activity, in addition to the connection that the women with this type of tasks. In terms of care for adult women, the family prefers that a woman be the caregiver, but not with male care recipients, who are assisted by a woman or a man; this dynamic is presented by the social construction of masculinity and femininity.

As social gender prescriptions are in force, men opt for paid activities that allow them to fulfill the mandate of being productive in public spaces; this limits their involvement in the role of caregiver, since it is classified as a task that does not guarantee a strong economic income.

According to Comas d'Argemir (2016, p.17), there are cultural and opportunity barriers that hinder men's involvement in care:

1. Cultural ones derive from the construction of what it means to be a man and what it means to be a woman; they imply that less value is attributed to the activities that women have traditionally carried out, and as a result there is little motivation for men to enter them. These cultural contents are in turn projected onto paid jobs and hierarchize them, making caregiving jobs less attractive to men. They also influence the attributes given to professional caregivers, as well as the preferences of care recipients regarding those who care for them.
2. The opportunity gaps derive from the differential in salaries and job categories between men and women, so that it is more costly for men to reduce their working day to devote themselves to care in the home, and women are more inclined to do it themselves; in addition, the low value and low salaries of care jobs discourage men from entering the sector and contribute to increasing the gender gap.

Regardless of the existing family dynamics, the workload is greater when this task is not the main activity of the caregiver, but one more of the various activities with which he or she that must comply; in this scenario, there is inequality in the amount of work because women not only care but also perform domestic work.

Conclusion

Social Sciences have reflected on how to dismantle the mechanisms of domination naturalized for centuries, which implies the deconstruction and analysis of ways of producing and reproducing emotional, family, economic and political relationships, in addition to proposing a new reality for the role of gender with which men recognize their emotional experiences, attend to their health needs, collaborate with women, so that in conditions of justice they contribute to community development.

When it is up to men's turn to take care, there is a symbolic back-and-forth hegemony and emergence which generates a conflict in their construction of masculinity. Hegemony implies power, and the emergent, an alternation to what is established, to what is expected to be fulfilled. In this sense, the socialization to which men are subjected in order to be strong and providers, productive and successful in the public sphere, is questioned when they engage in activities related to the care of another person, because these tasks are the opposite of what is socially expected of them; being a caregiver implies affection, being in private space and putting aside the idea of power.

If men become aware of their involvement in caregiving tasks and connect it with affection as a necessary act, they find themselves in a position to understand themselves better as individuals, learn from themselves, share their experiences, and establish more empathetic relationships. Moreover, this reflection allows them to recognize the inherent vulnerability of the human condition and build more equitable relationships with their peers, both men and women.

Thus, they make possible an answer of: "I," to the question "Who can take care of me? But not only a yes to accept responsibility, but also an affirmation to recognize that they have, as social entities, the capacity to transform themselves as males and as subjects who are pushed to maintain the position of superiority assigned to them. Analyzing it from the perspective of the social sciences makes it possible to dimension the pending issues that exist between masculinity and gender relations, as well as their link with the tasks of caregiving.

This emerges not only because of the fact that men perform tasks related to affectivity in a private space, but also because of the rethinking they do of themselves with respect to the social privileges granted to them since birth. The man who cares demonstrates strength, but with the passage of time, that strength will become the antithesis of his masculinity, and therefore, a being who will need to be cared for by others because his strength as a masculine being will disappear. It remains for reflection.

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