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The experiences of older male adults throughout their involvement in a community programme for men

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ABSTRACT

Community programmes have been shown to provide social and emotional benefits for older adults. The vast majority of community programmes for older adults are either mixed-sex or female-oriented in their activities and composition. As such, there is a scarcity of both opportunities for, and research focusing on older male adults' participation in community programmes geared towards men. The present study describes the experiences of older male adults throughout their involvement in a male-oriented community programme. Participants described their involvement in the community programme on the basis of their characteristics and experiences that preceded their involvement, the characteristics of their current involvement, and aspects of the programme and their participation that promoted their continued involvement. The findings of this study have potential utility for community organisations aiming to increase the involvement of older men in their programmes. Furthermore, the findings indicate that community programme participation has the potential to promote social engagement and healthy, active ageing among older men.

KEY WORDS—older male adults, community programmes, Men's Sheds, masculinity, social connection, social engagement, active ageing, grounded theory.

Introduction

Social connectedness, which refers to social support and the size of one's social network, and social engagement, which refers to participation in activities in one's social environment, are protective factors for older adults' physical and mental health (Giles *et al.* 2005; Herzog, Ofstedal and Wheeler 2002). Being socially connected has been shown to improve health and reduce mortality rates, enhance cognitive functioning, and decrease the risk

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of dementia and depression (Giles *et al.* 2005; Hays *et al.* 2001; Wang *et al.* 2002; Ybarra *et al.* 2008). Similarly, older adults who are more socially engaged experience lower levels of depression, generalised anxiety disorder and cognitive impairment (Golden, Conroy and Lawlor 2009). Social engagement has also been described as an important component of what has been labelled as active/successful ageing, as described in Activity Theory (Havighurst 1961; Lemon, Bengston and Peterson 1972; Longino and Kart 1982), Rowe and Kahn's model of successful ageing (Rowe and Kahn 1997), The World Health Organization (WHO) Active Ageing Policy Framework (WHO 2002), and more recently, in definitions by community-dwelling older male adults (Tate *et al.* 2009).

According to Activity Theory, wellbeing in late life is promoted by continued participation in social and leisure activities that are meaningful and purposeful from middle to old age. Furthermore, this theory states that when participation in preferred activities is no longer possible – due to factors such as illness, mobility issues and retirement – older adults must find replacement activities in order to preserve their wellbeing (Havighurst 1961; Lemon, Bengston and Peterson 1972; Longino and Kart 1982). Rowe and Kahn's model integrates medical and psycho-social factors to encompass three main components of successful ageing. These include a low probability of disease and disability, high cognitive and physical functioning, and active engagement. In line with Activity Theory, Rowe and Kahn's description of active engagement emphasises the importance of ongoing involvement in social and leisure activities in late life in order to age successfully. The WHO (2002) conceptualises active ageing as promoting physical, social and psychological wellbeing throughout the lifespan through participation in society according to one's needs, desires and capabilities. When looking at the ways in which older male adults define what it means to age successfully, themes of health, productivity, independence, spirituality, acceptance, social networks and life experience emerge (Tate *et al.* 2009). In contrast with previous definitions of active/successful ageing that emphasise productivity in employment sectors and the importance of avoiding disengagement from society, contemporary definitions of active/successful ageing are multi-dimensional, and focus on social engagement that is in line with older adults' preferences and abilities (Clarke and Warren 2007).

At the other end of the social wellbeing spectrum, loneliness, referring to the absence of close and reliable attachment figures and a lack of social connectedness (Weiss 1993), and social isolation, referring to a dearth of social support (Lubben and Gironde 2003), contribute to the development and maintenance of physical and mental health problems in late life. Individuals who experience loneliness and social isolation are more likely to experience morbidity and mortality due to cardiovascular disease, stroke,

cancer, diabetes, cognitive decline, dementia, depression and suicide (Berkman 1995; Centre for Disease Control and Prevention 1996; Heikkinen and Kauppinen 2004; House, Landis and Umberson 1988; Rokach 2000; Wilson *et al.* 2007).

Research by Cohen-Mansfield and Frank (2008) highlights the importance of services and activity programmes offered within the community to address the unmet psychological, social, medical and functional needs of community-dwelling older adults. To date, five literature reviews have examined the effectiveness of community interventions targeting social isolation and loneliness (Cattan and White 1998; Cattan *et al.* 2005; Dickens *et al.* 2011; Findlay 2003; Masi *et al.* 2011). Taken together, these reviews suggest that effective interventions are targeted at groups rather than individuals, and target specific groups of individuals such as older female adults, care-givers and widowed seniors. Furthermore, effective interventions allow participants and facilitators some degree of control in the planning, implementation and evaluation of the programme. Effective programmes also tend to include opportunities for education, social contact, activity, social support and the challenging of faulty cognitions related to social interaction (*i.e.* cognitive behavioural therapy principles). None of the studies evaluated in these literature reviews focused exclusively on men's involvement in community programmes. This mirrors the gender imbalance that exists within community programming for older adults, and illuminates the need to advocate for increased community support for older men in addition to the need for more research in this area. Furthermore, none of the studies that included older men in their mixed-sex samples examined the experiences of men throughout their participation in community programmes.

Until recently, the experiences of older men have been largely ignored in both the literature on ageing and masculinity, and in public health policies (van den Hoonaard 2007; Wilson and Cordier 2013). Masculinity refers to the societal and cultural construction of what it means to be a man. Although there are differing masculinities, hegemonic masculinity is the patriarchal and dominant ideal of masculinity and is associated with traits such as independence, competitiveness, assertiveness, emotional detachment and physical competence (Smith *et al.* 2007; Tannenbaum and Frank 2011). According to definitions of hegemonic masculinity, not only should men display the aforementioned traits, they should also reject social closeness, outward displays of emotion and vulnerability – traits associated with femininity. Among older men, there are several factors that can threaten the maintenance of a masculine identity, including poor health, decreased mobility, increased reliance on others, and seeking traditional health-care services and community-based services for help with loneliness and social isolation.

The possession of a masculine identity may prevent older men from participating in traditional, female-focused community programmes that are not in line with masculine traits. Therefore, programmes that allow men to maintain what they perceive as important to their own masculine identity may be more attractive to older men and more effective in decreasing loneliness and social isolation.

Men's Sheds are a unique example of a community program for older male adults. The first Men's Shed originated in South Australia in 1978, with the goals of integrating older men into the community and enhancing their knowledge, skills, social support, health and wellbeing through participation in traditional male activities such as woodworking, crafts, cooking, gardening and socialising (Golding *et al.* 2007; Wilson and Cordier 2013). Men's Sheds are based on the premise that the traditional shed is central to multiple aspects of different masculine identities, and that Men's Sheds can support these identities as men age, retire and move out of their homes. Since their inception in Australia, Men's Sheds have expanded into New Zealand, Ireland, England, Wales, Portugal and Canada, with new sheds emerging in Uganda, Finland, Belgium and Croatia (Wilson and Cordier 2013). Although each shed is unique, Men's Sheds share several commonalities, such as being located in a shed or workshop within a community, providing opportunities for hands-on activities and being mainly comprised of men. Research has demonstrated that Men's Sheds in Australia have helped older male adults with a variety of issues such as adjusting to retirement, coping with unemployment, excessive use of alcohol, boredom, inactivity, unhealthy diet, diabetes, heart problems, loneliness, arthritis, bowel cancer and problems caused by smoking (Ballinger, Talbot and Verrinder 2009; Golding 2011; Misan, Haren and Ledo 2008; Ormsby, Stanley and Jaworski 2010). Although several benefits to participating in Men's Sheds have been identified, there is a dearth of literature describing how older men begin and maintain their involvement in community programmes such as Men's Sheds. A Men's Shed has recently been developed in Winnipeg, Manitoba, Canada, which allowed our research group, consisting of the authors on this paper, the opportunity to conduct research in this area. The primary objective of this study was to describe the experiences of older male adults in a male-oriented community programme, using Men's Sheds as an example.

Methods

Men's Sheds Manitoba officially began in May 2010, and was developed by a local senior centre in collaboration with the Manitoba Association of Senior Centres based on the previously described Australian model. At that time

there were approximately 40 men aged 55 years and older who participated in activities such as gardening, model airplane building, carving, woodworking, cooking, game playing, walking, and coffee and conversation. Men found out about Men's Sheds by word-of-mouth recruitment strategies, advertisements in community newspapers, and in-person discussions at recruiting events at local grocery stores and farmers' markets. Men's Sheds was funded by the senior centre in which it was housed, as well as by a federal grant. We obtained ethical approval for this research through the University of Manitoba Psychology/Sociology Research Ethics Board.

Participants and procedure

We implemented a combination of purposive and theoretical sampling to recruit participants following grounded theory methodology (Glaser 1978, 1992). Our specific aims regarding purposive sampling were to recruit participants who were involved in different programmes within Men's Sheds (*i.e.* gardening, model airplane building, carving, woodworking, cooking, game playing, walking, and coffee and conversation) and participants who had been involved in Men's Sheds for varying lengths of time (*i.e.* involved since the beginning of Men's Sheds, involved for several months, recently involved). Our use of theoretical sampling allowed us to refine the interview protocol to investigate emerging concepts based on concurrent analysis. For example, when programme leaders within Men's Sheds generated interesting themes that we wanted to explore further, we recruited other Men's Sheds programme leaders to participate in interviews in order to compare these cases and emerging themes. Recruitment began after the first author visited several Men's Sheds programmes to observe and take fieldnotes. The fieldnotes documented information on individual and group activities and on significant processes that occurred during the programmes, which helped to contextualise findings. Recruitment and analysis took place simultaneously and continued until we achieved categorical saturation, evidenced by a lack of emergent thematic patterns in the data (Gaskell 2000).

Twelve Men's Sheds members between the ages of 61 and 87 (mean = 72.1) participated in this research. All participants identified as White and their level of education ranged from 8 to 17 years, with an average of 13.0 years. Most participants (91.7%) were retired for an average of 9.9 years (range: 6 months to 27 years). The majority of the sample (75%) was married, and 25 per cent were widowed. Three-quarters of participants rated their health as good, very good or excellent. Participants were involved in Men's Sheds for an average of 16.4 months.

Data collection

Participants completed a semi-structured in-depth individual interview of approximately 60 minutes in a location of their choice, which included their home, the Men's Sheds clubhouse or local coffee shops. The interview protocol began with the central, open-ended question: 'Tell me about your involvement in Men's Sheds'. Depending on the responses that emerged from this question, the interviewer (first author) explored more specific questions regarding participants' initial engagement in the programme, possible disengagement from the programme, barriers to participation, programme benefits and drawbacks, and anticipated future participation.

Analysis

We analysed interviews according to grounded theory methodology, following three types of coding: open coding, selective/focused coding and theoretical coding (Glaser 1978, 1992). We documented memos throughout the research process to remain consistent with grounded theory methodology, and to prompt the early analysis of data (Charmaz 2006). The initial open coding phase consisted of coding each line of written data, focusing on the discovery of preliminary thematic categories (Glaser 1978, 1992). At this stage of coding we identified *in vivo* codes, direct quotations from participants' interview statements, to refine initial concepts and/or document unique categories in the descriptive models (Charmaz 2006). Throughout the selective/focused coding phase, we developed codes that were more conceptual and synthesised larger amounts of data (Glaser 1978, 1992). Finally, when coding at the theoretical level, we developed relational explanations between thematic categories and sub-categories (Glaser 1978, 1992). Movement back and forth between the three types of coding occurred throughout the development of descriptive models. Similarly, consistent with grounded theory methodology, we compared incoming data with analysed data, examining similarities and differences between participants' interview statements (Charmaz 2006; Glaser 1978, 1992). This process generated descriptive models illustrating the experiences of older male adults in a community programme for men.

Rigour

We addressed the rigour of this study's findings by employing criteria outlined by Lincoln and Guba (1985), including credibility and dependability. We achieved dependability, analogous to the reliability or consistency of findings, through the administration of each interview protocol by the same interviewer (the first author), and through independent coding of

several transcripts by multiple coders (first and second authors in addition to two undergraduate student volunteers). Multiple coders independently coded four interview transcripts at the initial open coding phase, and met to discuss emergent codes and concepts. Initial codes that the four independent researchers generated were similar and consistent. When researchers had a unique code to add to the analysis, or when there was a discrepancy in codes, the team came to a consensus on the code for a particular line or section of the transcript. To verify that interviews were representative of participants' views, participants had the option of reviewing their interview transcript. Seven participants responded to this request, and noted that the interview transcripts accurately reflected their involvement in Men's Sheds. Two of the seven participants made minimal additions, which were coded and integrated into subsequent analyses. We achieved credibility, analogous to internal validity, by clearly documenting interview fieldnotes, data analysis procedures, memos, and decisions regarding emerging codes, categories and descriptive model development.

Findings

Participants described their involvement in Men's Sheds by their characteristics and experiences that led to their initial involvement, the characteristics of their current involvement, and aspects of the programme and their participation that promoted their continued involvement. Participants described their initial, current and continued involvement as being fluid and interrelated, all contributing to their overall experience in Men's Sheds. The importance of both social connection and social engagement was a central, overarching theme that was evident throughout men's descriptions of their initial, current and continued involvement in Men's Sheds.

Preceding characteristics and experiences to involvement

The characteristics and experiences that led to participants' initial involvement in Men's Sheds included self-perceived individual characteristics, loneliness and social isolation, and social influence (see [Figure 1](#)).

Self-perceived individual characteristics. Participants spoke about their individual characteristics that led them to initiate their involvement in Men's Sheds. These characteristics included their need to keep busy, their desire to strive for achievement, the value they placed on social connection and knowledge exchange, and their possession of pro-social attitudes that emphasised giving back to the community through volunteering, helping

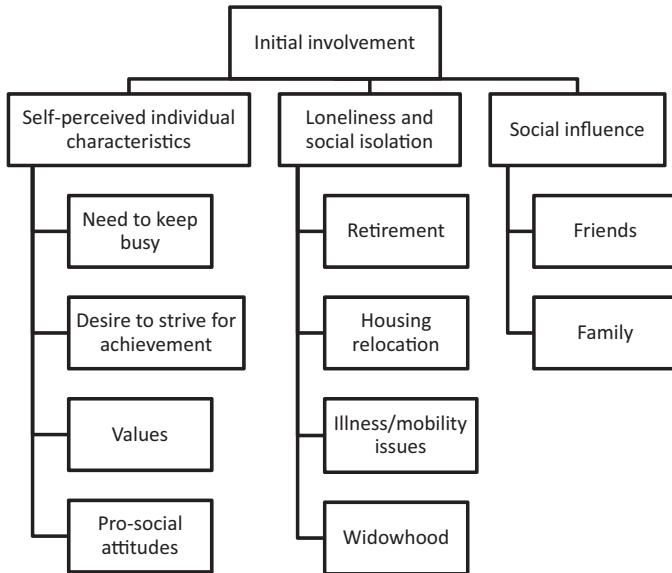


Figure 1. Characteristics and experiences prior to involvement.

and care-giving. Participants expressed that Men's Sheds provided them with opportunities to satisfy these needs, desires, values and attitudes. When describing his need to keep busy, one participant noted:

I don't like sitting around, I always like to get going or do something, or always be involved in something. It seems to me I can't sit still. So, whenever there's a chance – if there's ever a chance to do something or join something, well, I go. (participant No. 7)

When discussing their prior engagements in work, hobbies and side-projects, participants described themselves as striving for achievement, being goal-oriented and driven to succeed. Men's Sheds provided participants with an outlet to re-create experiences to satisfy these internal drives. Whether participants were learning a new skill or practising an established one, it was evident throughout interviews and observation that they wanted to complete a project that would then lead to feelings of pride and a sense of accomplishment. Illustrating this theme, one man spoke about applying his skills as a chemist to his involvement in a Men's Sheds cooking programme, and the sense of accomplishment he gained from this:

A lot of my career was putting the methods that we used in the labs I was involved with, documenting all of that for the whole lab. And it's very similar to making recipes. So now when I look at recipes it's easy for me to go through it very quickly and figure out whether it's something I want to do or not. (participant No. 6)

Participants also shared the values of social connection and knowledge exchange (*i.e.* teaching and learning), which preceded and were central throughout their involvement in Men's Sheds. One participant expressed the importance of knowledge sharing for older men:

It's fabulous the amount of knowledge and experience that a group of men have and are quite willing to share. Men, older men, I think tend to become storytellers, whether it's a story about their life or a story about what their skills are. And once they have left the working area, then men need to turn to their hobbies ... and to be able to share those things, it's fabulous. (participant No. 8)

A final self-perceived individual characteristic that participants emphasised was the presence of a pro-social attitude. This was portrayed in their desire to volunteer and 'give back to the community' (participant No. 2), help others, and in some instances act as informal care-givers to friends and family. One participant discussed how Men's Sheds satisfied his desire to act as a helper: 'You know the gentleman that I bring, almost blind, I'm now building his model [airplane] for him. He flew it back in 1940 ... Just seeing him happy once every two weeks is enough' (participant No. 3).

Loneliness and social isolation. In addition to the self-perceived individual characteristics outlined above, participants emphasised loneliness and social isolation resulting from a variety of experiences as leading to their involvement in Men's Sheds. These experiences included retirement, relocating homes, illness and mobility issues, and widowhood.

Many participants spoke about becoming socially isolated after retirement, having lost the social networks that they developed over the course of their careers, and being unsure of how to form new networks. One participant expressed: 'When you're talking about mentally what happens [after retirement] – we've always known, human beings are social animals. And I believe retirement isolates too much, 'cause you're no longer with your comrades at work' (participant No. 10).

Moving from a house to a smaller apartment or condominium also emerged as a related issue to loneliness and social isolation, preceding men's involvement in Men's Sheds. Several men spoke about having to forgo their hobbies and limit their social network involvement due to their change in location. One participant noted: 'That's why this programme is so critical, because the number of guys that are in condominiums that have given up most of their hobbies because you had to have a garage or a basement to do them' (participant No. 3).

Illness and mobility issues emerged as barriers to participating in activities that had been an important part of participants' lives, leading to loneliness and/or social isolation and their subsequent involvement in Men's Sheds. When discussing a fellow participant who had suffered several strokes, one

man noted that without Men's Sheds, his friend would not have social contact with other men: 'This [Men's Shed] is unbelievable for him. You talk to Henry, his health is such that he can't do anything other than cribbage, so he waits all week to come here for this group of guys' (participant No. 3).

Participants also described widowhood as an important antecedent of loneliness and social isolation, which preceded men's involvement in Men's Sheds. One participant spoke about the difficulty for widowed men, in particular, to find social activities to participate in:

My wife passed away in 2008, so I tend to be alone quite a bit, so I do a lot of things by myself . . . It's hard for a man to find activities to get together and do. (participant No. 5)

Social influence. A final experience leading to men's involvement in Men's Sheds was the influence of a friend or family member who encouraged their participation. Several participants met before Men's Sheds had begun through their involvement with a local church, and noted that they felt comfortable joining the programme due to these previously developed connections. Other participants described that their spouses or family members encouraged them to get involved in Men's Sheds:

My daughter and my wife said, 'maybe you should get involved in something'. You know, I used to have a close friend who died, what was that, three years ago, so right now I don't have any close friends my age, so just have my wife around and my family, kids. So they suggested 'why don't you go there and do something different'. (participant No. 11)

Characteristics of current involvement. We characterised participants' descriptions of their current involvement in Men's Sheds (*i.e.* involvement at the time of their interview) according to the aspects of the programme that facilitated their involvement.

Programme aspects. The opportunities inherent in programme participation as well as the novelty of the programme influenced participants' current involvement in Men's Sheds. Participants discussed opportunities to socialise, work on a hobby, volunteer and engage in a combination of these elements as important characteristics that kept them involved in Men's Sheds. For most participants, the opportunity to create close bonds and larger social networks was integral to their participation. One participant described: 'I joined Men's Sheds for the social part . . . and that's really what I need more than anything else is to meet with people and just spend time with people' (participant No. 9). When describing what it meant to be socially connected, another participant noted, 'For the first time in a long time I feel accepted . . . like one of the gang' (participant No. 1).

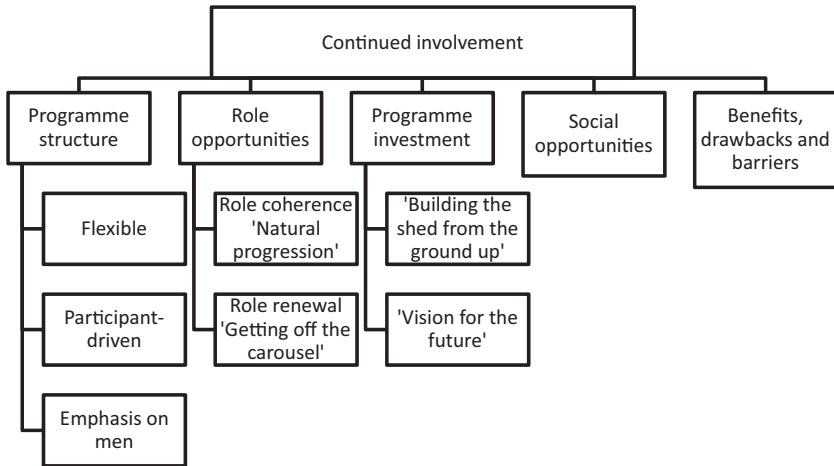


Figure 2. Aspects that promote continued involvement.

With regard to the novelty of Men's Sheds, participants noted that there was 'nothing else like it' (participant No. 12), and described themselves as 'pioneers' (participant No. 5) in creating something meaningful and innovative in Manitoba, and as contributing to a good 'cause' (participant No. 2, No. 5) in reducing the loneliness and isolation of older men, that had yet to be addressed through senior centre programming.

Aspects that promoted continued involvement. Men described their continued involvement in Men's Sheds as dependent on several key factors related to the programme and their participation in the programme. Men discussed the importance of the structure of the programme, opportunities to fulfil desired roles, their investment in the programme and opportunities for social engagement. Men also spoke about the benefits, barriers and drawbacks to their participation, which influenced their continued involvement in Men's Sheds (see Figure 2).

Programme structure. Participants indicated that their continued involvement in Men's Sheds was facilitated by its flexibility, participant-driven format and emphasis on the participation of men. Participants described the flexible structure of Men's Sheds as a much needed change from the high degree of structure in their work and family lives. For example, one participant noted:

I can come here with this group in the afternoon and I have no pressure. I'm not in charge. I don't have to worry about anything. I can just concentrate on having fun with the other guys, which is hugely different than my previous life. (participant No. 3)

In keeping with the Australian model, Men's Sheds Manitoba sought to maintain a participant-driven format, which was a highly desirable programme aspect among participants who appreciated the opportunity to have a voice in the development of the programme, and in the capacity of their involvement. One participant illustrated this preference when noting:

Older fellas have been workin' all their life. They know what they want, they know what they like to do, they know what they wanna do, they have their sort of way of doing things, they don't like to be told what to do. That's not a way of approaching it. So a project where they themselves figure out what they wanna do, how they wanna do it and where they wanna do it. They're in charge and in control of the programme, it's really a better approach. (participant No. 5)

A final structural advantage that men discussed was the predominant involvement of men in Men's Sheds. Men expressed several advantages to this, including: being able to participate in traditionally male-oriented activities, a lack of community programmes for men, opportunities for social contact with other men that they might not otherwise experience in their lives and feeling more 'open' talking with other men when women are not present. One participant described the need for male-oriented community programming when stating:

With all of us living longer and the influx, starting especially from now on of the Baby Boomers, there's going to be a huge need for programming. Many men's social aspects of their lives are run by their spouses . . . I believe, men with men contact, it's a different kind of contact, and I think that's very important. (participant No. 8)

When discussing his preference for the male-oriented aspect of Men's Sheds, one participant described:

Being mainly men is very important because men will not talk about some things when there are women around that they will talk to each other when there is not . . . umm I think men will be more open with each other when, when there's not women. (participant No. 2)

This point was also evident during observation, when participants would stop themselves from making certain jokes because the female first author was present.

Role opportunities. In addition to the structural aspects of Men's Sheds, men expressed that their continued involvement was influenced by opportunities to act in accordance with previous roles established throughout their lives (role coherence) or opportunities to act in opposition to these roles (role renewal). Most participants described themselves as working in a position of leadership throughout their careers. Within this analysis, two groups of men emerged: men who described a 'natural progression' (participant No. 2) to leadership in Men's Sheds, and men who expressed a desire to 'get off of the

carousel' (participant No. 1) and participate in Men's Sheds without the added stress of leadership.

With regard to the first group, many participants expressed being happy to take on leadership roles within Men's Sheds, which included teaching skills, organising programming and events, managing finances and fundraising. These participants appeared to experience a sense of pride when in these roles. The second group expressed a desire to escape their work role and create a new role for themselves within Men's Sheds. These men described being tired from long careers that involved organising and managing, and wanted less stress in their retirement. For example, one participant noted: 'I don't want that tie down where you have to do this and you have to do that and be responsible ... This is a recreation thing, which is re-creation' (participant No. 4).

Programme investment. Having an investment in Men's Sheds was another experience that participants described as leading to their continued involvement in the programme. Men discussed having a passion for the programme and an investment in its future, which was illustrated in two main concepts: their involvement in 'building the shed from the ground up' (participant No. 2), and sharing a 'vision for the future' (participant No. 8) of Men's Sheds. Participants expressed ideas for programme expansion, and spent many business and planning meetings 'dreaming' (participant No. 2) about the future of Men's Sheds:

It's gonna take another year and a half in my mind, but I'm thinking that if it takes hold, then my goal is to see Men's Sheds all over Winnipeg and Manitoba, not just where we are here. I think it's too important not to. (participant No. 10)

Social opportunities. Participants also discussed their continued involvement as contingent upon the opportunities inherent in the programme to build larger social networks and form closer bonds with other men. One participant said: 'I now have a new, within the last 18 months, a new group of really good friends. I'm not alone' (participant No. 8). Men characterised the quality of these relationships by the mutual respect, acceptance and appreciation that they had for one another, which was exemplified in the ways they would talk about the other members – as amazing carvers, helpers, committed leaders and friends. One participant discussed the concept of mutual respect when noting: 'I guess if I was vain I could say I get respect, and I think we show that to each other in every way' (participant No. 2).

Benefits, drawbacks and barriers to involvement. Finally, men spoke about the benefits, drawbacks and barriers to participation as influencing their future involvement in Men's Sheds. Benefits of involvement included expanded

friendships, 'broadened horizons' and improved mental health. One man spoke about his experience with depression when he was carving alone in his basement, and how his participation in Men's Sheds has improved his mental health:

I think that when I was downstairs, I was probably slowly slipping into a depression without realising it. I wasn't as happy go lucky as I could be. I'm very quiet, normally speaking, until I get to know people, but I think depression was starting to hit because I was becoming more blue and some of my carvings showed anger. And since I've been coming to Men's Sheds, I'm healthy and more of my people show more caricatures or happy faces . . . Men's Sheds has lifted that whole aspect of loneliness off my shoulder and helped me tremendously in that one sense, and I think I'm happier. (participant No. 10)

Most participants denied experiencing any drawbacks as a result of their involvement in Men's Sheds. Participants who experienced significant drawbacks to their participation may have ended their involvement in the programme prematurely. Some participants noted that they committed too much time to the programme, which took away from other aspects of their lives. Other participants noted their frustration with members' differing conceptualisations of the goals of Men's Sheds, as well as the varying visions of the future of Men's Sheds that members held.

A tripartite typology of barriers to men's involvement emerged, encompassing individual, social and broader macro-level barriers that existed both in isolation and in combination to affect men's current and future involvement in the programme. At the individual level, personal illness and mobility limitations including problems with knees, joints, heart, and eyesight regularly affected participation in Men's Sheds. One participant reported: 'Transportation is my biggest problem 'cause I cannot drive a vehicle anymore, cause I have no sight in the one eye' (participant No. 7). Social barriers included family responsibilities and maintaining friendships outside Men's Sheds. One participant explained: 'I have, sometimes, other priorities. And ah my wife hasn't been really well; I don't want to leave her too long. Um, she's um got a lot of problems, health-wise' (participant No. 1).

Finally, gender, ageism and access to resources emerged as macro-level barriers. Participants spoke about the lack of programmes for men as being a barrier to finding out about and participating in Men's Sheds. One man stated: 'There are virtually no just men groups. There are virtually none' (participant No. 3). Participants described ageism as a barrier to their involvement in Men's Sheds and community programmes more broadly. They explained that society neglects the importance of older men after they retire, illustrated by the lack of support and community programming for them. Several participants expressed their frustration with this when saying: 'We're seniors so therefore we're back-burners. I think society has a

drawback, in that once you retire, you're retired'; and 'in some ways, society does not care about retired men' (participant No. 10). Another participant expressed: 'There needs to be a societal change here to recognise the needs and possibilities of senior men' (participant No. 8). A final macro-level barrier to men's involvement in Men's Sheds was the difficulty participants experienced accessing financial resources to carry out programme activities.

Discussion

This study focused on the experiences of older male adults in a male-oriented community programme. The model emergent from this research describing men's involvement in this programme consists of three interrelated thematic categories. These include their preceding characteristics and experiences to involvement, the characteristics of their current involvement, and aspects of the programme and their participation that promote their continued involvement.

Through their involvement in Men's Sheds, participants reported being socially engaged in life-long hobbies, satisfying preceding individual characteristics including the need to keep busy, the desire to strive for achievement, values of social connection and knowledge exchange, and pro-social attitudes. In line with Activity Theory (Havighurst 1961; Lemon, Bengston and Peterson 1972; Longino and Kart 1982), this maintenance of previously enjoyed activities resulted in improved mental health for participants. Similarly, many participants described their future participation as contingent upon their ability to maintain a sense of role coherence, participating in a specific role and in activities that they had experience with throughout their working lives. According to Activity Theory, this role coherence might have also led to participants' preserved or increased wellbeing and life satisfaction.

Participation in Men's Sheds appears to have made a profound impact on its members. In line with the definition of active ageing conceptualised by the WHO (2002), Men's Sheds provided men with the opportunity to participate in society according to their needs, desires and capabilities, thus promoting their ability to age actively and successfully. With regard to men's needs, their need to keep busy and maintain an active lifestyle was satisfied through their programme participation. Similarly, their desire to participate in certain roles and activities was facilitated by the participant-driven structure of Men's Sheds, which allowed men to participate in the ways that they desired. Finally, regardless of their health status, mobility and other capabilities, men were able to engage in Men's Sheds in flexible ways that contributed to ageing actively and successfully.

Furthermore, our participants discussed themes of successful ageing that were identified in research by Tate and colleagues (2009). Specifically, health, productivity (achievement), independence, acceptance and social networks emerged as important aspects of men's participation in Men's Sheds that led to continued participation. This provides evidence for the important implications of this programme in promoting active/successful ageing among older male adults.

Given the lack of community programmes focused on the participation of older male adults, it is important to discuss the unique benefits that Men's Sheds provided to participants within the context of ageing and masculinity. Traditional health-care services and community-based services for older adults may not be desirable for older men with traditional masculine values. The flexible, participant-driven structure of Men's Sheds may protect men's independence by providing them with the opportunity to participate in whatever way they deem most appropriate to them. Participation in traditional masculine activities may also encourage men to maintain their masculine identity through their involvement in Men's Sheds. Finally, men described being able to discuss issues more openly when they are with other men, as opposed to when they are in mixed-sex groups. Perhaps this openness is due to Men's Sheds providing older male adults with a safe venue to discuss pertinent issues in the absence of pressure to act in masculine ways such as being detached from emotion, and refraining from showing vulnerability and demonstrating social closeness. As such, Men's Sheds may provide men with a masculine holding environment whereby their masculine identity is not threatened in the face of behaviour that challenges the masculine identity such as vulnerability and social closeness. The openness that men described when discussing issues with other men may also be a result of the topics that men felt comfortable discussing with other men that they do not feel comfortable discussing with other women. It is a further possibility that men adopted a way of discussing personal issues in front of other men that protects their masculine identity, for example, through the use of humour. Given that we did not directly explore this issue in this study, there is a need for future research that explores the ways in which Men's Sheds and other male-oriented community programmes encourage men to maintain their masculine identities.

Implications

This study promotes an understanding of ageing and late life for men. It expands on a scarcity of research that has explored the experiences of older male adults throughout their participation in community programming, and

contributes to decreasing this knowledge gap by describing the aspects of men's participation that influenced their initial and continued involvement in a male-oriented community programme.

Understanding important aspects of older male adults' initial, current and continued involvement in Men's Sheds may be important for community organisations aiming to increase men's participation in their programmes. The participant-driven and male-oriented structure of Men's Sheds was highly valued by men, allowing them the flexibility to participate in the ways that fit best with their needs, desires and capabilities. Men were provided with opportunities to participate in a wide variety of educational, social and volunteer-related activities. Similarly, men were encouraged to exchange knowledge with one another, and were shown mutual respect when doing so. These findings closely align with the conclusions of several literature reviews examining effective characteristics of community interventions targeting loneliness and social isolation (Cattan and White 1998; Cattan *et al.* 2005; Dickens *et al.* 2011; Findlay 2003; Masi *et al.* 2011). It would be useful for community organisations to consider including these valued experiences when developing and implementing future programmes for older men, as well as when marketing programmes to older men. Furthermore, community organisations aiming to increase the participation of older male adults might consider developing programmes similar to Men's Sheds that allow men to maintain their masculine identity through their participation. Findings suggest that independence in participation, masculine activities and opportunities for men to discuss issues openly around other men are encouraged to meet this goal. Insight into the barriers that men faced throughout their participation in Men's Sheds might serve as a catalyst to initiate conversations at community and governmental levels about the ways in which these barriers could be removed to facilitate the increased participation of older male adults in community programmes.

Finally, in light of the mental health and active ageing benefits of Men's Sheds, this research has important implications for health and health-care services. Men's Sheds has the potential to be an effective intervention for improving the health and wellbeing and decreasing the loneliness and social isolation of older male adults. Given the reluctance of older male adults to utilise formal mental health-care services (Mackenzie, Gekoski and Knox 2006; Mackenzie *et al.* 2012), non-traditional male-focused programmes such as Men's Sheds that help men to cope with emotional difficulties while maintaining masculine identities may be a potential solution to their reduced rates of formal health-care service use.

A limitation of this research is the small sample size, which should be considered when evaluating its findings and implications. The difficulty recruiting older male adults to participate in this study flows from the limited

number of older male adults participating in Men's Sheds and other community programmes, and the difficulty recruiting men to participate in these programmes. It is also important to note the homogeneity of the sample as a challenge to providing descriptive models that cut across a wide range of socio-demographic characteristics. All of the participants described themselves as White, most participants lived in the same community (and as such were of similar socio-economic status) and most participants discussed being in a position of leadership throughout their careers. Interviewing participants of differing socio-demographic characteristics may have added unique categories, sub-categories, properties or dimensions to the descriptive models, due to the distinct life experiences they might bring to their participation.

Despite these limitations, findings from this study have the potential to impact the development and implementation of effective community programmes for older men. Male-oriented community programmes that embody similar characteristics to Men's Sheds have the potential to help men to maintain meaningful connections to the activities and roles that they developed throughout their lifespan. Furthermore, programmes in line with the principles of Men's Sheds also have great potential to enhance older male adults' social connectedness and social engagement, promoting the healthy, active ageing of this growing population.

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References

- Ballinger, M. L., Talbot, L. A. and Verrinder, G. K. 2009. More than a place to do woodwork: a case study of a community-based men's shed. *Journal of Men's Health*, **6**, 1, 20–27.
- Berkman, L. F. 1995. The role of social relations in health promotion. *Psychosomatic Medicine*, **57**, 3, 245–54.
- Cattan, M. and White, M. 1998. Developing evidence based health promotion for older people: a systematic review and survey of health promotion interventions

- targeting social isolation and loneliness among older people. *Internet Journal of Health Promotion*, **13**, 1–9.
- Cattan, M., White, M., Bond, J. and Learmouth, A. 2005. Preventing social isolation and loneliness among older people: a systematic review of health promotion interventions. *Ageing & Society*, **25**, 1, 41–67.
- Centre for Disease Control and Prevention 1996. Suicide amongst older persons: United States 1980–1992. *Journal of the American Medical Association*, **275**, 7, 509.
- Charmaz, K. 2006. *Constructing Grounded Theory*. Sage, California.
- Clarke, A. and Warren, L. 2007. Hopes, fears and expectations about the future: what do older people's stories tell us about active ageing? *Ageing & Society*, **27**, 4, 465–88.
- Cohen-Mansfield, J. and Frank, J. 2008. Relationship between perceived needs and assessed needs for services in community-dwelling older persons. *The Gerontologist*, **48**, 4, 505–16.
- Dickens, A. P., Richards, S. H., Greaves, C. J. and Campbell, J. L. 2011. Interventions targeting social isolation in older people: a systematic review. *BMC Public Health*, **11**.
- Findlay, R. A. 2003. Interventions to reduce social isolation amongst older people: where is the evidence? *Ageing & Society*, **23**, 5, 647–58.
- Gaskell, G. 2000. Individual and group interviewing. In Bauer, M. and Gaskell, G. (eds), *Qualitative Researching with Text, Image and Sound*. Sage, London, 38–56.
- Giles, L. C., Glonek, G. F. V., Luszcz, M. A. and Andrews, G. R. 2005. Effect of social networks on 10 year survival in very old Australians: the Australian Longitudinal Study of Aging. *Journal of Epidemiology and Community Health*, **59**, 7, 574–9.
- Glaser, B. G. 1978. *Theoretical Sensitivity*. The Sociology Press, Mill Valley, California.
- Glaser, B. G. 1992. *Basics of Grounded Theory Analysis: Emergence vs Forcing*. The Sociology Press, Mill Valley, California.
- Golden, J., Conroy, R. M. and Lawlor, B. A. 2009. Social support network structure in older people: underlying dimensions and association with psychological and physical health. *Psychology, Health & Medicine*, **14**, 3, 280–9.
- Golding, B. 2011. Older men's wellbeing through community participation in Australia. *International Journal of Men's Health*, **10**, 1, 26–44.
- Golding, B., Brown, M., Foley, A., Harvey, J. and Gleeson, L. 2007. *Men's Sheds in Australia: Learning Through Community Contexts*. National Vocational Education and Training Research and Evaluation. Available online at www.ncver.edu.au/publications/1780.html [Accessed May 2010].
- Havighurst, R. J. 1961. Successful aging. *The Gerontologist*, **1**, 8–13.
- Hays, J. C., Steffens, D. C., Flint, E. P., Bosworth, H. B. and George, L. K. 2001. Does social support buffer functional decline in elderly patients with unipolar depression? *American Journal of Psychiatry*, **158**, 11, 1850–5.
- Heikkinen, R. L. and Kauppinen, M. 2004. Depressive symptoms in late life: a 10-year follow-up. *Archives of Gerontology and Geriatrics*, **38**, 3, 239–50.
- Herzog, A. R., Ofstedal, M. B. and Wheeler, L. M. 2002. Social engagement and its relationship to health. *Clinics in Geriatric Medicine*, **18**, 3, 593–609.
- House, J. S., Landis, K. R. and Umberson, D. 1988. Social relationships and health. *Science*, **241**, 4865, 540–5.
- Lemon, B. W., Bengtson, V. L. and Peterson, J. A. 1972. An exploration of the activity theory of aging: activity types and life satisfaction among in-movers to a retirement community. *Journal of Gerontology*, **27**, 4, 511–23.

- Lincoln, Y.S. and Guba, E.G. 1985. *Naturalistic Inquiry*. Sage, Newbury Park, California.
- Longino, C.F. and Kart, C.S. 1982. Explicating activity theory: a formal replication. *Journal of Gerontology*, **37**, 6, 713–22.
- Lubben, J. and Gironde, M. 2003. Centrality of social ties to the health and well-being of older adults. In Berkman, B. and Harootyan, L. (eds), *Social Work and Health Care in an Aging Society*. Springer, New York, 319–45.
- Mackenzie, C.S., Gekoski, W.L. and Knox, V.J. 2006. Age, gender, and the underutilization of mental health services: the influence of helpseeking attitudes. *Aging and Mental Health*, **10**, 6, 574–82.
- Mackenzie, C.S., Reynolds, K., Cairney, J., Streiner, D. and Sareen, J. 2012. Disorder-specific mental health service use for mood and anxiety disorders: associations with age, sex, and psychiatric comorbidity. *Depression & Anxiety*, **29**, 3, 234–42.
- Masi, C.M., Chen, H.Y., Hawkey, L.C. and Cacioppo, J.T. 2011. A meta-analysis of interventions to reduce loneliness. *Personality and Social Psychology Review*, **15**, 3, 219–66.
- Misan, G., Haren, M. and Ledo, V. 2008. *Men's Sheds: A Strategy to Improve Men's Health*. Spencer Gulf Rural Health School and the Centre for Rural Health and Community Development. Available online at http://202.74.67.49/docs/publications/860_Mensheds_Report_Misan.pdf [Accessed May 2010].
- Ormsby, J., Stanley, M. and Jaworski, K. 2010. Older men's participation in community-based Men's Sheds programmes. *Health and Social Care in the Community*, **18**, 6, 607–13.
- Rokach, A. 2000. Correlates of loneliness as perceived by the terminally ill. *Current Psychology*, **19**, 3, 237–48.
- Rowe, J.W. and Kahn, R.L. 1997. Successful aging. *The Gerontologist*, **37**, 4, 433–40.
- Smith, J.A., Braunack-Mayer, A., Wittert, G. and Warin, M. 2007. 'I've been independent for so damn long!': independence, masculinity and aging in a help seeking context. *Journal of Aging Studies*, **21**, 4, 325–35.
- Tannenbaum, C. and Frank, B. 2011. Masculinity and health in late life men. *American Journal of Men's Health*, **5**, 3, 243–54.
- Tate, R.B., Loewen, B.L., Bayomi, D.J. and Payne, B.J. 2009. The consistency of definitions of successful aging provided by older men: the Manitoba follow-up study. *Canadian Journal on Aging*, **28**, 4, 315–22.
- van den Hoonaard, D.K. 2007. Aging and masculinity: a topic whose time has come. *Journal of Aging Studies*, **21**, 4, 277–80.
- Wang, H.-X., Karp, A., Winblad, B. and Fratiglioni, L. 2002. Late-life engagement in social and leisure activities is associated with a decreased risk of dementia: a longitudinal study from the Kungsholmen Project. *American Journal of Epidemiology*, **155**, 12, 1081–7.
- Weiss, R.S. 1993. Loss and recovery. In Stroebe, M.S., Stroebe, W. and Hansson, R.O. (eds), *Handbook of Bereavement: Theory, Research and Intervention*. Cambridge University Press, Cambridge, 271–84.
- Wilson, N.J. and Cordier, R. 2013. A narrative review of Men's Sheds literature: reducing social isolation and promoting men's health and well-being. *Health and Social Care in the Community*, **21**, 5, 451–63.
- Wilson, R.S., Krueger, K.R., Arnold, S.E., Schneider, J.A., Kelly, J.F., Barnes, L.L., Tang, Y. and Bennett, D.A. 2007. Loneliness and risk of Alzheimer disease. *Archives of General Psychiatry*, **64**, 2, 234–40.

World Health Organization (WHO) 2002. *Active Ageing: A Policy Framework*. Available online at http://whqlibdoc.who.int/hq/2002/who_nmh_nph_02.8.pdf [Accessed May 2013].

Ybarra, O., Burnstein, E., Winkielman, P., Keller, M. C., Manis, M., Chan, E. and Rodriguez, J. 2008. Mental exercising through simple socializing: social interaction promotes general cognitive functioning. *Personality and Social Psychology Bulletin*, **34**, 2, 248–59.

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