#### ORIGINAL ARTICLE

SOCIOLOGY OF HEALTH & ILLNESS

# 'We're welcomed into people's homes every day' versus 'we're the people that come and arrest you': The relational production of masculinities and vulnerabilities among male first responders

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#### **Abstract**

Encouraging men to open-up about their feelings is a new cultural directive, yet little is known about how this works in practice, including to promote mental health. Ideals of hegemonic masculinity may be increasingly tolerating expressions of vulnerability in some areas of social life. However, the expression of vulnerability in paid work and/or career situations is regulated by organisational ideals and circumstances that may also produce distress. To address uncertainty in the literature, we investigated the experiences of men in traditionally male dominated professions, namely first responders (police, paramedics, and firefighters/rescue). Twenty-one UK based men of diverse ranks and experience currently working within first responder services participated in semi-structured telephone interviews. Distress was positioned as an inevitable part of the work. Yet, striking differences in institutionalised ways of expressing vulnerabilities differentiated the experiences of frontline workers, contributing to a wide spec-

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trum of men's silence right through to relative openness about vulnerability, both in the workplace and domestic spheres. The findings provide importanat insights into how vulnerability is institutionally regulated, illuminating and contrasting how the possibilities for male vulnerabilities are socially produced.

#### KEYWORDS

emotions, masculinities, mental health, qualitative interviewing, work

## INTRODUCTION

# Masculinity and its relational complexities

Research in the masculinities field has focussed on the normative consequences of hegemony (i.e. the 'most honoured way of being a man' in any particular locale) in diverse contexts (Connell, 1987; Connell & Messerschmidt, 2005, p. 832). As the critical turn in masculinities scholarship developed, the gender focus broadened to include wider sexual and relationship diversity (Hammack et al., 2019). The complexities of social class were also explored in relation to masculinities. For example, their valorisation as the working-class fleshy embodiment of real masculinity, not to mention a kind of 'dumb brutes... minstrelization' (Coston & Kimmel, 2012) (p. 107). Critical analyses of masculinities focussed explicitly on normative, gendered social relations (Connell & Messerschmidt, 2005). However, the field has not always been fully *relational* in character. For example, by reducing hegemony to a set of toxic traits, rather than acknowledging the dynamic participation of the others involved. Critically, hegemony can potentially evolve to include more traditionally feminine features like empathy and care (Lomas et al., 2016). Hence, there is a clear need to better explore how gender is always done (or undone) in-relationship to others (Ely & Meyerson, 2010; West & Zimmerman, 1987) (Table 1).

What does it mean in our study to think in epistemologically relational terms (Nishida, 2017)? For our paper, this means in relation to self, work and domesticity, we are interested in the ways in which gender emerges transactionally, and adapts to evolving workforces, their hierarchies and historically formed structures. Gendered practices of work, constructions of the self (e.g., possibilities for authenticity), and workforce consequences for mental health are constantly assembling (and re-assembling) via relationships (Turnbull et al., 2020). Said another way, it is possible to view practice – in this case work on the frontline – as operating transactionally at the nexus of affect, identity, the workplace, and the domestic sphere (family and home life). Work mediates, brokers, and emphasises aspects of gender, and in ways that can re-package normative gendered relations as something different from what they were previously (e.g., 'necessary skills' or 'inevitable sensibilities'). In that way, necessities of (paid) work, and assumptions therein, and their intersections with identity are illustrative of the creative and relational (re)production of masculinities. A relational model of critical masculinities is also helpful in such contexts, as it allows us to view disparate spheres of social life as interconnected and 'characteristics' as emergent at the

TABLE 1 Table of participant sociodemographics

No	Pseudonym	Ethnicity	Marital status	Age (by group)	Years in service	Professional role
1	Tim	White British	Single	20-29	Less than 5	Firefighter
2	Stephen	White British	Married	30-39	Between 5 and 10	Firefighter
3	Toby	White British	Cohabiting	20-29	Less than 5	Firefighter
4	Leo	Mixed: White and Black Caribbean	Married	50-59	Between 20 and 25	Firefighter
5	Alan	Mixed: White and Black Caribbean	Married	30–39	Between 10 and 15	Firefighter
6	Ralph	White British	Cohabiting	30-39	Between 10 and 15	Firefighter
7	Darren	White British	Married	30-39	Between 10 and 15	Firefighter
8	Jack	White British	Single	20-29	Less than 5	Firefighter
9	Ben	White other	Single	30-39	Between 5 and 10	Paramedic
10	Jessie	White other	Single	30-39	Less than 5	Paramedic
11	Travis	White other	Cohabiting	20-29	Less than 5	Paramedic
12	Nathan	Other Mixed	Single	30-39	Less than 5	Paramedic
13	Ray	White British	Married	40-49	Between 20 and 25	Police officer
14	Callum	White British	Married	30-39	Between 15 and 20	Police officer
15	Peter	White British	Married	40-49	Between 20 and 25	Police officer
16	Noel	White British	Married	50-59	Between 15 and 20	Police officer
17	Simon	White British	Divorced	40-49	Between 20 and 25	Police officer
18	Rupert	White British	Married	50-59	Between 15 and 20	Police officer
19	Michael	White British	Divorced	40-49	Between 20 and 25	Police officer
20	Ali	South Asian	Married	50-59	Between 10 and 15	Police officer
21	Anthony	White British	Cohabiting	20-29	Less than 5	Police officer

intersection of meaning, affect, circumstance and experiences (Lusher & Robins, 2009). Masculinity, in this way of thinking is fully relational, moving and developing across social interactions and institutions, including the home, workplace, intimate relationships, workplace cultures and so on.

# Vulnerability at work

What do we mean by vulnerability? Relationally, selves can be considered as transactional, rather than autonomous and agentic, where relations *constitute* our reality, they do not just influence it (Buys & Marotta, 2021). Here, vulnerability is inevitable not just because of the limits of our material bodies, but also because emotions emerge from our interactions. We are all drawn into the affective drama of life, and the stakes are high, "...we are [in] constant danger...others rejecting us; not accepting us as members of a group; not providing the support we expect; or using our relationships to harm us." (p. 29) (Herring, 2016). There has been considerable emphasise on vulnerability and (hidden) distress in the masculinities literature (Brownhill et al., 2005; Ridge

et al., 2011). Often, normative structures have been shown to actively discourage the expression of vulnerabilities, including at work (Ridge et al., 2019), and in health contexts (like the severe mental distress involved in suicide) (Ridge et al., 2021).

Nevertheless, vulnerability is a contested term, with varying applications. Few have documented participant perspectives on the concept, and research in general is currently lacking (Lajoie et al., 2020), especially in relation to male dominated workplaces. In terms of how it is operationalised and examined in the current article, vulnerability is interpersonal and institutional as suggested above (Gair & Baglow, 2018). Relationally, vulnerability necessarily comes into being, and so while it may be individually experienced, it is socially produced, even if the ways in which it is produced are not easily observed (Pilkington et al., 2020). In the context of men and masculinities, vulnerability remains paradoxical. The very system which positions men as dominate and misogynistic, and which structures men's relations with themselves and others (institution, society and beyond) is harm producing, and thus inevitably productive of vulnerability. Not only in terms of suffering, but also in terms of assuaging suffering, and promoting recovering from distress (Ridge et al., 2021). Vulnerability has particular purchase in the context of the current article wherein it is clearly part of everyday practice (i.e., working with the vulnerable), but also part of the interactional nature of the work, with wide-ranging implications, including for domestic relations.

As we explore in the current article, vulnerability exists at the intersections of what is affectively induced, institutionally regulated, and that which is informally accommodated. The story of vulnerability at work, for the police, firefighters and paramedics we interviewed, is necessarily paradoxical. It is diverse (see below), self-evidently important, differentially allowed, and structurally ordained. It *exists and is produced* at the nexus of individual disposition, relationships, institutions and evolving gendered norms. As we explore in this paper, vulnerability is a critical tension that both holds people together (e.g., as family/community/culture), binds people along particular dimensions (e.g., as men), divides people (e.g., domestic tensions) and is induced by certain conditions (e.g., budget cuts and poor governance). Vulnerability at work is thus a hegemonic cultural influence that demands of us an ethic of care.

# Diversity at work

Our final area of focus is how workplaces and their collective practices mediate masculinity and vulnerability. In particular, how organisational cultures, structures and leadership styles (Gautier, 2015), limit (or enable) the expression of vulnerability, wellbeing and capacities to acknowledge authentic experiences like vulnerability (Joiner, 2011). Of particular importance in our data, is how the structure/norms of frontline work and the provision of specific interventions and care influence what is and isn't possible, with consequences for men. The assumption has often been that men tend to be repressive and that they largely influence the workplace norms and cultures that they (mostly) occupy. We attempt to push beyond this stereotypical reading, indicating the structural dimensions which 'prop up' reductive environs. We also narrate how challenge to normative ideals can occur, depending on context. Thus, our article offers important new insights into the critical analysis of the differential intersection of gender, work, domestic life and vulnerability. As men are known to experience considerable variability in what counts as hegemonic masculinity depending on context (see for example Lomas et al., 2016), we analysed the varying settings men find themselves in (like male-dominated work organisations, public performances, domestic settings). This approach has the potential to reveal differential insights into the

production and expression of male vulnerabilities and identities developed therein (Creighton & Oliffe, 2010). Our research question was this: Relationally, among male first responders, how do vulnerabilities develop, organise and transform in connection to workplaces, public incidents, homelife and hegemonic masculinity?

#### **METHODS**

## Overview

To uncover contemporary challenges, the influence of institutions, the production of vulnerability and implications for (gendered) relations, the experiences of men in traditionally male dominated professions were investigated qualitatively. One-to-one semi-structured telephone interviews with 21 men from three emergency services were conducted (police, paramedics, and firefighters/fire and rescue) to compare and contrast experiences. The terms of first responders, frontline service officers or emergency service officers are used interchangeably and refer to police officers, paramedics and firefighters.

#### Recruitment

A purposeful sample of male first responders from three emergency services were recruited. All had a minimum of 12 months experience with no current serious mental health diagnoses (that would pose difficulties in consenting to – and taking part in – our study). Contact and first recruitment was initiated with each emergency service via the professional networks of authors. Following each interview, the researcher checked in to see how participants felt at the end of the telephone interview, inviting feedback. Some participants commented that the interview was cathartic in ways they had not expected, and/or that they recalled issues they had previously forgotten. In closing, the researcher asked participant if they could approach other men in the emergency services they knew for interview (i.e., snow ball sampling). As we were initially able to recruit police more readily than other categories through our networks, the researcher personally approached and successfully talked to firefighters and paramedics about the study at a variety of London-based organisations, asking for volunteers. Here, the posting of flyers, and word-of-mouth about positive experiences men had during interviews, led to further interviews.

Eligible individuals were first contacted by email and provided with a participant information sheet, and a copy of the consent form, following which each potential participant completed a remote pre-participation screening survey via Qualtrics (a General Data Protection Regulation, 2018 (https://gdpr-info.eu) and Data Protection Act, 2018 (https://www.legislation.gov.uk/ukpga/2018/12/contents/enacted) compliant remote survey platform). Once eligibility was assessed, participants were offered the chance to ask questions before signing and returning the consent form (via Qualtrics/email).

Twenty-one men ranging from 27 to 55 years of age (M age = 38.4, SD = 9.91) took part. Nine were police officers, ranked from constable to inspector, with 4 to 23 years service (M service = 16.7, SD = 6.13). Eight were firefighters with 2 to 22 years service (M service = 9.1, SD = 6.33), and four were paramedics with 1 to 6 years service (M service = 2.2, SD = 2.5). See Table 1 for further participant sociodemographics.

## Data collection

Data was collected using semi-structured telephone interviews, lasting between 45 and 90 min. While in-person interviews might have helped to develop rapport, and allowed the researcher to observe visual cues, the telephone interview meant the researcher was able to focus on participant voice, breathing and intonation cues to gauge emotions (Cachia & Millward, 2011). The researcher used these cues to clarify with participants about how they were experiencing interviews. The researcher used their person-centred counselling skills to convey informality, warmth and reassurance of no judgement down the telephone line. In terms of potential benefits, because the men could be anonymous on the telephone, and be in their own environment, this may have aided disclosure. Men had some control over the telephone interview, including regulating how much emotion to reveal to the researcher, who herself was unseen, and thus somewhat anonymous also. Therefore, telephone interviewing may have allowed participants to regulate the call (and open-up emotionally) in ways different to in-person interviews on sensitive topics: Telephone interviews offered convenience, reach and enhanced anonymity to aid discussion about sensitive topics (Holt, 2010).

One researcher – a cis gender female - conducted all the interviews. This researcher (CG) is a charted psychologist, consultant in organisational psychology, as well as a sexologist and author. While the researcher had no prior relationship with any of the participants, counselling skills were used to rapidly create a sense of informality, rapport and trust with participants. The researcher looked out for – and acknowledged – emotions that were apparent in the men, and frequently paraphrased back to the men what they were saying, to ensure she understood them. An interview guide included topic lists and questions encouraging participants to share work and life related experiences. Participants first described their job. Then questions focussed on the challenges they experienced inside and outside of work, and strategies they used to cope. Finally, experiences and perceptions of mental health struggles and exposure to any bullying were explored. All participants were employed in Wales or England. Interviews were digitally audio recorded, transcribed verbatim, checked for accuracy and anonymised. To protect participant's identities, pseudonyms and age ranges are used.

# Data analysis

Transcripts were analysed using thematic analysis to capture patterns and shared meanings across interviews and to understand variations on themes (Braun & Clarke, 2006). Initially, to become familiar with the dataset, one researcher, SL, read through all the transcripts and noted down initial ideas. Transcripts were then again read by SL, giving full and equal attention to all data. A coding system was initiated by SL, with DR, CG and CD debating and helping to refine the coding scheme, until all agreed upon a final coding system. Codes included joining the service, help-seeking, 'bottling it', opening up, stressful scenarios, trauma, humour, finding comfort in work, destructive behaviours, performing masculinity and balancing work-home life. All anonymised transcripts were uploaded into NVivo software, which was used to code, organise and retrieve data for analysis. The use of coding reports ensured each data segment was compared with all other relevant data segments (i.e., constant comparison (Dye et al., 2000)). Codes that were most relevant to the research question were compared and grouped together based on their similarity in meaning, leading to the formation of the overarching themes, which became the subheadings used in the results section below. SL then draughted a first report of the themes, that was debated and commented on by all authors. DR subsequently developed the initial reporting

on themes into a manuscript, inviting multiple rounds of feedback from all authors. The manuscript underwent revisions over a period of one year. The analysis involved a constant moving back and forth between the data, the development of themes, as well as the literature to finalise the manuscript. As three of the authors (DR, AB and JO) were experts on masculinities, each independently examined the emerging findings in relation to gender, reporting back findings, and subjecting their interpretations to scrutiny from the wider team. The work of Connell (1987) as outlined above provided a common framework to discuss and interpret the data. We engaged our theory-based understandings to develop the findings, focusing on a masculinities and relational lens. Anonymous reviewers additionally encouraged the authors to further elaborate on the links between the findings and gender throughout the manuscript.

## **Ethics**

The study was approved by the Ethics Committee (ETH1718-2333 and ETH1920-0065), Department of Psychology, University of Westminster, and followed the guidelines of the British Psychological Society code of human research ethics. Data was securely stored and managed in accordance with the General Data Protection Regulation 2018 and the Data Protection Act 2018. A code to identify whether the participant was a policeman (P), firefighter (F), or paramedic (A) is used for all quotes.

#### RESULTS

#### Distress as inevitable

The roles and responsibilities of the emergency services in general were described as dynamic, fluid and 'unbelievably varied'. Interestingly, roles ranged from the more traditionally female caring roles, including 'social work where someone's not coping at home' to 'delivering a death message', to more traditionally masculine roles like dealing with 'road traffic collisions' or 'going to a murder'. Despite wide ranging challenges, many participants reported a sense of achievement when people sought their help in particularly challenging times, and where they could make a difference to people:

I think it's tough. It can be stressful sometimes but ultimately, I find it's the most rewarding work that I've ever done.

(Anthony, P)

Participants experienced life-changing situations, sometimes daily. Examples included, life threatening injury, suicide, murder, assault, serious fires, road traffic collisions, child and elder abuse. Many had experienced threatening and abusive behaviour, especially where alcohol or drugs were involved. They endured personally 'hazardous' situations with the potential to affect their health and mental wellbeing. Dealing with their own distress thus becomes an inevitable part of the work:

If this person that you're saving was a drug user and he's got blood...you think, oh my God, did I have any cuts on, because I've rushed straight in to help this person... Does this person have Hepatitis, or anything like this?

Participants reported that attending 'big jobs', 'nasty incidents', and 'emotional twirl' types of callouts were especially difficult to cope with. Particularly impactful were situations of power-lessness whereby participants were unable to be the 'protector' (another valued masculine role). Despite attempts to leave the distress of the job at work, participants reported post-event outcomes ranging from feelings of guilt (e.g., 'We couldn't get to them. So there's a lot of guilt there.', Alan, F), emotional flareups (e.g., 'I was getting quite emotional at things that I wouldn't normally get emotional about...I knew that I wasn't feeling myself', Jack, F), and trauma (e.g., 'I had flash-backs...I couldn't sleep', Michael, P), including issues that required support to be provided (e.g., 'I ended up with PTSD and depression', Ralph, F). Some participants recognised that they had been unable to manage their distress, and subsequently engaged in maladaptive externalising behaviours, such as withdrawing from homelife, or becoming aggressive or argumentative, all of which had the potential to create tensions in relationships:

I was on holiday...and I absolutely blew my top at my girlfriend because she forgot to bring a fork back from the restaurant...then my son...I lost it with him...I was so angry, I was crying...everything just crumbled around me.

(Ralph, F).

I think when I've had a particularly stressful week, I can be quite lethargic at home... I throw a lot of my energy into work... my partner...she had to beg me to take annual leave.

(Anthony, P).

Working in high stress environments and dealing with dangerous fast moving incidents was physically and emotionally draining, yet some claimed they became accustomed to trauma (e.g., 'You sort of become immune...been there, done it and you go into autopilot...you almost become a machine for that moment...', Ali, P). Others found ways to manage their emotions in the moment (e.g., 'I do see those jobs as a problem-solving exercise...I try not to absorb the emotional side of things too much.', Jessie, A). But even workers who had apparently managed their distress conceded the inevitable impact of multiple trauma exposures:

I've found that there is an accumulative effect of trauma that just doesn't leave you quickly enough, and for me it's becoming an increasingly hard job to do.

(Ralph, F).

## Saviours and law enforcers

It was apparent that there were differences between paramedics, fire fighters and police officers in the type of stresses they described being exposed to. Police officers categorised their stressful experiences into 'street' and office stress. Participants frequently focussed on carpet work (office duties) as distinct from street work when discussing stress, and spoke of becoming increasingly overworked and burnt out due to having to do 'a lot more with a lot less'. There was a particular frustration regarding 'snowballing' workloads and increased expectations.

There are two different kinds of work stress. There's the stress within the police station and there's the stress outside, on the streets...[it's] what happens within the police station that affects me...

(Anthony, P).

We're under a lot of pressure, because it's day to day, call to call, and paperwork to paperwork. It's quite relentless for us ...

(Ali, P).

Indeed, there was some desperation in the narratives and a sense of giving up. A lack of staff and resources, limited support from their superiors, insufficient time to complete tasks, demotivated police officers and lowered morale, undermined passion for the job:

...there are aspects of shift work where you would come in and the expectations would be...unreasonable and there's no...flexibility in the system. I experienced that, I see it on the faces of my colleagues, I hear it...it's at crisis point really....

(Simon, P)

Some 'street' stress was universal for first responders (e.g., emotionally exhausting work, tiredness from shift work, as well as health and safety issues). Participants generally highlighted that being responsible for quick decision-making under public scrutiny was an especially stressful aspect of the work. With bystanders watching, filming or attempting to get involved, participants were acutely aware of how they might be misrepresented:

...you've always got the public there watching you, filming you...everyone, their eyes are on you, and you don't want to make a mistake, or don't want to look like you're not doing everything you can for that person.

(Jack, F)

Crucially, police officers in particular had to deal with negative perceptions (fuelled by media portrayals) about their role in terms of investigation and correction, in ways that firefighters and paramedics did not have to attend to. Thus, police officers believed (compared to other first responders who considered that their role of helping/caring was well recognised by the public), they were often 'seen as the villains' irrespective of the help they provided. Public trust and respect was thought to be decreasing with time, and some officers experienced high levels of verbal and physical abuse directed towards them:

I've been assaulted and been verbally abused, or you're even targeted in the area of your own home or where you're living because of the job you do...

(Simon, P)

Although some paramedics also dealt with patients lashing out, and were exposed to assaults, they could hand-over potentially dangerous situations and let police officers manage the event:

...if the situation's going to be dangerous or you don't feel safe, the idea is we stand back and we call for police backup...they'll go in first if we even remotely feel uneasy or unsafe at that situation.

(Nathan, A)

Although the traumas of the job weighed heavily on both paramedics and firefighters, their narratives focussed on how their roles helped others (e.g., '...to be there to help [people] on their worst day, is incredible...', Ralph, F). In an interesting differential of masculine roles, paramedics

and fire fighters (even when exposed to similar situations to police), were thought to be viewed by the public as 'saviours' (which as well as having masculine connotations of rescuing – including heroics – could also be linked to feminine roles of caring):

Think we get quite a unique experience in that we're welcomed into people's homes every day...someone greets you with a smile and is like, thank God you're here.

(Travis, A).

Whereas, police officers were perceived in more straightforward and masculine terms as law 'enforcers' (e.g., '...we're the people that come and arrest you...they don't say policeman...it's copper all the time.', Callum, P). Some police officers relished the role of 'law enforcer', with its obvious links to traditional forms of masculinity: the authoritative figure in charge who has the power to discipline:

I like to talk to people, I like to find out about them, and I like to help them before I punish them.

(Anthony, P).

Authoritative performances were also acknowledged as important in other frontline work (see Ben, below). In this kind of projection of an authoritative masculinity that (in the case of police, has power to act on the world), public acknowledgement of internal states (including human frailty) could be considered incongruous with public performances:

...we need to be confident in our roles, because if we're meek and quiet you...can get pushed around by patients... You're called for your knowledge and if you're not sure, people aren't going to trust you.

(Ben, A).

If you show weaknesses, majority of the clientele ...they're going to make your life difficult... When people see people walking around with guns and Taser...being tooled up, strong, as you say, macho, able to be resilient to most things, but inside you're human... (Michael, P).

The historically evolving nature of policing was articulated by participants. For Noel, change was coming from all directions. Others like Ray flagged an increasing feminisation of policing, by making links to the 'chunk of mental health' they now dealt with, or by pointing out they were taking on the work of the traditionally caring professions:

...it's a very difficult job because the job changes, [the] law's changed, the procedure's changed, the IT certainly changes, and it's very frustrating...you also get organisational stress and sort of say...So there's lots of stresses coming and biting you from all sorts of angles.

(Noel, P).

You look at how policing has evolved...the name of policing stays the same, the role has changed...it is far more of a social work role than an enforcement.

(Ray, P)

With ever increasing workloads, being less visible to the public (by way of spending more time in the office), some police believed their role (and thus identity) as a 'law enforcer' was eroding. The data also showed that 'softer' more traditionally feminine dimensions were emerging (although not without resistance), as further outlined in the next sections.

## **Expressing vulnerabilities**

Stressful incidents raised personal challenges that made coping difficult for some men. Some reported constantly struggling, or being in a state of stress and exhaustion, yet concealed such vulnerabilities at work. Not all participants believed that working in the emergency services had an impact on their emotional wellbeing, and varying ways of dealing with challenging experiences were reported. Speaking up and seeking help (or not) was closely linked to safety issues around admitting vulnerability, with important differences between the 'law enforcers' and the 'saviours'. The paramedics and firefighters, and six of the nine police officers agreed that opening up to their colleagues was potentially helpful, and it could be reassuring to know that others had gone through similar experiences:

You can either talk to the colleagues that you're there and involved with, because they've experienced it too, and it forms more of a debrief. Or you talk to colleagues you feel more comfortable talking to, where you are prepared to show yourself being a little bit more vulnerable.

(Rupert, P)

However, police officer's narratives were framed by the barriers involved in actually opening up about vulnerabilities. Organisationally, police officers, especially those in response teams, worked with rotating colleagues. Here, there was comparatively less safety in self-disclosures, the threat of being exposed as 'weak' loomed large, and opening-up could be particularly risky:

...it's about who you talk to... it has to be someone really that you know has been through it...you don't want to be shown weak I suppose...there are certain people who I can talk to knowing that if I say something personal...it doesn't go any further... maybe two people...they're not from a background of police.

(Simon, P)

The police service was portrayed as a relatively hierarchical, traditionally male environment, and there was a focus in the narratives of getting on with the job, moving onto the next task, prioritising action above talk about emotions, not complaining, and avoidance of displays of vulnerabilities which could signify weakness. Some level of opening up emotionally was possible in other services if relations with colleagues were conducive, for example, amongst paramedics who were regularly paired together:

... you're working with them for the whole day, so as soon as something happens... which you might have been a bit stressed out about, you've always got them to debrief with...

(Nathan, A)

The narratives highlighted how reciprocal relations play a role in allowing men to reveal their vulnerabilities. For example, one paramedic relied on the actions of co-workers to evaluate the safety of sharing what he was feeling:

Some people you might speak to and they're not willing to really engage with their emotional side without wanting to admit vulnerability for themselves. I wouldn't really feel comfortable opening up to people about my problems if they were not comfortable themselves.

(Jessie, A)

Thus transactionality is an important consideration. Firefighters talked about close 'family like' teams where they reported greater sharing of distress and trauma than police. Amongst this group, opening-up and closing down emotions was possible due to the kinds of relationships they had:

Whatever we go to, we go to as a crew, and we experience it together. So, we always, no matter what's happened, we're always able to talk to each other about it because we were all there...we're together and we can talk about it however it's affected us... Some have been in tears after jobs and it's just getting through it, having a cup of tea and, as I say, taking the mickey out of each other until it all settles down.

(Toby, F)

The use of dark humour in networks was a common coping strategy in all three emergency services. Playing with taboo subjects in this way was seen as helping men process emotions when there was limited interactive capacity to do so:

...the best form of counselling is probably just the humour in the canteen with some other colleagues because you know they've gone through it as well...It is a quick fix, it helps you move onto the next job, it's a way of talking about it in a disarming way... you're distracted and it's minimised the...impact.

(Noel, P)

Beyond recognising the value of opening up, firefighter stories revealed considerable capacity to collectively process vulnerabilities (e.g., '...I think most things get dealt with that way.', Leo, F). Despite traditionally masculine attributes associated with firefighting, the ideal of manly men being autonomous and unaffected seemed outdated in this environment. Here, the work culture can be one where emotional vulnerability is normalised and even portrayed as therapeutic:

...everybody's got emotions so some incidents do make you cry...still people thinking that men don't cry...that's one way of bottling it up and that's just not the way to go in our line of work...'men shouldn't be weak', but that's not the case, we're human, men should talk.

(Stephen, F)

Debriefing was a platform for first responders to process experiences and build stronger connections with colleagues. While firefighters were officially encouraged to debrief with each other especially after key events, not all paramedics were able to process 'big jobs' in this way (e.g., 'most instances I've had people go home and then deal with it at home.', Travis, A). Paramedics who were able to debrief and 'sit down as a team' reported benefits from the process both mentally as well as operationally:

The fire service are very good at doing, what we class as hot debriefs... straight away after the incident we'll gather together and talk...to each other and getting past whatever difficulties we faced during that incident.

(Toby, F).

...it's usually a pretty open shout, a discussion, how did we all feel that went, what did we feel went well, what did we feel went badly...I find that's really good for just airing your thoughts...that helps a lot of people...

(Ben, A)

Firefighters reported, that in addition to more emotional 'hot debriefs', less emotionally-charged, 'cold debriefs', designed to cognitively and strategically analyse performance, were also undertaken. Cold debriefs too were positioned as an important tactic for coping:

...we sit down and usually no matter what time of day or night it is we make a cup of tea, and we sit round the table, and we talk about things as a watch...

(Leo, F).

Although firefighters agreed that they were in a fortunate position to be relatively open with their 'watch', and swap stories to find reassurance, some (e.g., older generations) reportedly did hold back. In contrast, police officers reported few opportunities for team wide debriefs. Unless an event was 'quite major, like a murder or a shooting', that would call for a 'hot debrief', there was little time allocated for debriefing:

...used to happen quite a while ago...the firearms teams do, but it doesn't tend to happen with us [response teams] unfortunately. It would be a great idea.

(Callum, P).

Although team level open discussions were less common for police, as with firefighters, the communal tea and coffee areas can be a space for officers to divest themselves of worries:

In the morning over a coffee...we have a little, 5 min rant and that is a coping mechanism... I call it the coffee rant...

(Noel, P).

While the assumption was that women could be more caring and emotional by their nature, this played out in different ways at work. Firefighters, for instance, highlighted how women might still need to act tough in a male dominated industry, although sometimes women were in positions to challenge any macho culture. Women in the police force were depicted as under considerable pressure to fall into line with the culture of the police force:

She (boss) is very, very open and she pushes everybody to...speak up if you're not. That attitude, it's OK not to be OK.

(Alan, F).

...she [a colleague] said herself that she had very much had arresting bitch face... it's the kind of person that joins the job is someone, or I feel is someone, that is a bit tougher, or wants to be a bit tougher...

(Callum, P)

In sum, there appears a relative silence around mental health within the police force that is institutionalised (e.g., '...in terms of, would we all get round and talk about it, that would be a resounding no.', Peter, P). Nevertheless, police participants recognised the problems connected to trauma and burnout when trying to find ways to cope by themselves. Some recognised that the conversations around mental health are slowly beginning to thaw out, and change was inevitable (e.g., 'in the early 2000s there was...very limited opportunity [for support], where it really does feel now it's on tap.', Ray, P). 'On paper' these new avenues for conversations were welcomed, but there was acknowledgement that in actuality, problems get 'brushed under the carpet'.

## Informal and formal ways in which vulnerability is managed

Aside from the professional nexus of peer support, informally, family and friends, particularly partners, were an important (and frequently only other) source of support or (traditionally feminine) caring, where some men were able to express their vulnerability:

The amount of baggage and trauma that I've suffered in work... She's [partner] probably got a qualification in how to deal with that side of things...

(Michael, P)

Similar patterns between the 'saviours' and the 'law enforcers' were apparent in home-life. Firefighter and paramedic stories focussed on opening up to their families and getting care, while police officers focussed more on the dangers of managing their accumulated distress at home:

I'm a big believer that men should cry and let it out, so if I have a bad day I go home to the wife, talk about it...If I cry, I cry but she's always there to support me.

(Stephen, F).

One of the biggest stresses for me at the moment is trying to balance my work life and my home life...There's a lot of people in the job that have destroyed their first marriage, and are trying to make amends to their second, and I don't want to be in that situation.

(Rupert, P).

Men were expected to continue to perform on the job, all the while negotiating what acceptable expressions of vulnerability means at work. Here, home life can become a critical backstage area that provides care, supporting the demanding (public) male performances required of first responders:

...people who are in the Emergency Services have relationships with people in the Emergency Services, because they understand...during the day there are so many highs and so many lows that you forget most of them, but your body and your mind has gone through it, whether it's at the back of the mind now, or whatever...

Most participants recognised the availability and potential usefulness of formal work-based help, however, few used them. There were several important barriers preventing men, particularly police officers, from pursuing this support. Police management could seem especially steeped in traditional masculinity, being relatively hierarchical and status driven:

He said, I have to be honest with you team, I hope to achieve the rank of superintendent in two years, and if anyone gets in my way, I'll have your job.

(Anthony, P).

Other senior police staff seemed to promote the mindset that 'you've just got to get over it'. There was also a lack of trust expressed in management (e.g., '...they're trying to prove to their seniors that they can manage discipline, but you end up not trusting those guys...', Noel, P). Thus, the capacity for the expression of vulnerability emerges from the culture of the services. Where structures are flattened, as described by firefighters, discussing vulnerabilities becomes a possibility:

...[in the fire and rescue service] your line managers will ride on the appliances with you, but the ambulance service and for example, the police force... they won't have their line managers ride out with them...in the fire service you're a big family and you ride out together and you face whatever's in front of you together.

(Toby, F)

Firefighters and paramedics noted that outdated views about 'being a man' in the emergency workforces were being challenged, particularly from younger generations joining the services (e.g., '...younger people are just a bit more open minded and a bit more accepting of everyone's different attitudes.', Ben, A). However, as outlined above, police forces were still thought to be lagging in regard to change (e.g., 'it will take time for...fresh blood to come through, and the people that have those biases to be reduced...', Rupert, P). The police culture was thought to discourage men from opening up despite the changes afoot:

...we get assaulted quite often, and very often they're minor assaults...And I would say 75% of the time we don't flag that up, because the culture really is such that you just have to get on with it really.

(Peter, P)

Additionally, admitting vulnerability and sharing mental health struggles was stigmatised (e.g., 'I still consider mental health to be one of the last great taboos...don't ask, don't tell.', Rupert, P). Unless police participants were exposed to particularly distressing and traumatising events, particularly physical injuries, a lurking danger was that mental health problems get interpreted through a lens of malingering:

It's perceived as a weakness...people that go off on stress are light weights and they just wanted a bit of a holiday...I have seen people that have gone off on stress related illnesses, but then they post of Facebook, riding their horses through the surf and having a wonderful time...

(Noel, P)

There were also notions of anti-recovery in how mental health was framed in the police force (e.g., '... it's quite often perceived as something you never get over, rather than an injury you can heal from.', Rupert, P). Mental health problems were also linked to concerns about authority and performance (e.g., '[mental illness] might affect your performance at work, some people might find it difficult to trust you...', Anthony, P). As a consequence, some men feared for their jobs if they were labelled with mental health problems (e.g., 'if you expose yourself as being vulnerable...they're going to sack you or they're going to move you.', Simon, P). Finally, others worried taking time off work to recuperate could impact colleagues (e.g., '...especially in certainly some of the smaller teams, sort of you are letting the team down...', Noel, P).

Despite hegemonic masculinity in the police force being traditionally oriented, the majority of participants were aware that some of their colleagues needed support with their mental health struggles. They positively endorsed speaking out and seeking professional help for others (if not themselves), and commented on the benefits of the available services. There was awareness amongst police that 'bottling up' stresses and worries was damaging, and could result in serious problems. In contrast, firefighters tended to recognise that the 'men don't cry kind of mentality' had failed, and men who go 'off-sick with stress' should be affirmed and supported:

[If I] need to go and take a couple of weeks off to get my head right, I think a lot of people would more likely to go, "Yeah, I think that's a good idea"...

(Toby, F)

## DISCUSSION

We set out to investigate male first responders, and the development and resolution of their vulnerabilities in relation to themselves, workplaces, public incidents, homelife and hegemonic masculinity. Ours is the first relational analysis of male distress and coping across different kinds of worksites, and the contrasts uncovered were remarkable. Acknowledging the considerable scholarship on work and masculinities hitherto, and taking a relational lens to the issues, we uncovered important insights into the production - and expression - of male vulnerabilities. In particular, we elaborated on the ways in which relations in varying work and domestic settings assuage, discount or intensify vulnerabilities. Clearly, what counts as hegemonic masculinity in highly public and traditionally male professions is variable. While some organisations allow a softening of traditional masculinity (e.g., in hot, emotional debriefs in the fire service), others are struggling with such change (e.g., think of the 'enforcer' role that resists the feminisation of the police force). Some performances of masculinity at work (e.g., as authoritative) relate uncomfortably to vulnerabilities (e.g., 'inside you're human'). The addition of mobile phone technology in recent years (including video cameras), as well as democratising social media distribution channels, adds a further dimension to the otherwise well examined gendered performances of public selves (Mumby, 1998). Online (gendered) performances can create the potential for widespread public approval or disapproval, and men moderate workplace practices with public judgement in mind, 'you've always got the public there watching you, filming you...everyone, their eyes are on you' (Maaranen & Tienari, 2020).

In terms of job choice and training, men entering traditionally male-oriented professions were not initially prepared to navigate demanding affective states – increasingly including the mental health problems in society, but also their own vulnerabilities as the norm (e.g., guilt, powerlessness, fear, failure, trauma). Here, the emergence of personal vulnerabilities featured as essential collateral work for participants to find ways to manage. While the rewarding nature of the work can

balance out the generation of vulnerabilities, and men claim to find ways to adjust to the trauma (e.g., use of black humour, focussing on the practical issues at hand), trauma-related outcomes (including aggression, taking it out on others, alcohol misuse, and distressed intimate partner relationships) were commonly reported. Men believed that they could only manage, compartmentalise or sidestep difficult affective states to a certain degree. There was a sense in which such emotional problems could accumulate and spill out into other parts of life (Brownhill et al., 2005).

While all participants generally had to perform their public duties under some pressure, evident were striking differences in the institutionalised cultures that shaped the production of vulnerabilities, hegemonic masculinity, and potentials for expression therein. Here, vulnerabilities at work were moulded by forces like austerity related funding cuts, conflicted feelings about specific work incidents, the accumulation of work stresses, the structural nature of organisations, public perceptions, and the use of props (e.g., getting "tooled up"), all of which could shape not only how men expressed their masculinity, but how they chose to express their interior world (or not, as the case may be). Police stories were underpinned by anxieties about all kinds of pressures and change afoot. There were the ongoing negative public perceptions about 'cops' and 'enforcers' depicted in the media (although some police participants focussed more positively on the power they believed they could wield); the alienating nature of rigid and competitive police force hierarchies which seemed to defy change; the lack of opportunities for peer support despite its obvious value; not to mention how their (traditionally) masculine-oriented work was evolving to encompass more traditionally feminine (caring) work on top of enforcement. As well, masculinity was seen as evolving in younger generations (at least on the door-step of policing, if not within) with a sense that younger men were generally more open to expressing their vulnerabilities. Not to mention the increasing pressures of 'carpet cop' work (i.e., working in an office), thereby experiencing more indoor as distinct from street stresses as they entered the second decade of austerity. On the other hand, firefighters and paramedics were likely to experience themselves as cast in more favourable human and hegemonic masculine ways as 'saviours' by the public. Additionally, they could potentially hand over particularly dangerous situations to police to render them safe. Thus, they were more consistently able to link their work to helping or even saving people, while pointing to positive public impacts and perceptions, and potentially good mental health outcomes for themselves.

Most men had bought into the idea, at least cognitively, that opening up about their struggles was protective. However, the realisation of this ideal for themselves was frequently hindered by the structures available that in actuality regulated vulnerability and masculinities. For instance, participants did not directly talk about the impact of all-male teams. However, we know that comparatively, there was more male-bonding and sharing of stresses and emotional openness reported amongst firefighters, and less bonding and openness described in police work. The expression of vulnerability is increasingly positioned as an important human capacity (Seidler et al., 2018), but enacting it remains difficult. We uncovered differential capacities to entertain and express vulnerabilities in the emergency services as institutions. Police narratives revealed a greater level of closing down of their vulnerabilities for a range of reasons, like the competitive and detached nature of work, and its comparatively hierarchical nature, where trust was in short supply. In contrast, firefighter narratives revealed more sophisticated structures for collective management of vulnerabilities (e.g., via 'hot debriefs' at the time of difficult incidents where vulnerabilities were normalised in certain spaces). The nexus of work and vulnerability overlayed with masculine ideals, is frequently one of channelling emotional work into home relations. However, such practices risk a wide range of unhelpful dynamics, including emotional overload for partners, and creating a hidden backstage of suffering, with a workplace frontstage of unrealistically inflated resilience. The danger particularly voiced by police, was that relationships could be compromised by their work induced vulnerabilities, jeopardising such affiliations (Tal, 2021).

The research literature reveals profound contemporary disruptions to regimes of masculinity (e.g., the collapse of homophobia as a means to close down the sensitivities of men (McCormack & Anderson, 2010)). Here, re-configurations of hegemony encourage men to adopt more traditionally female traits. Certainly, men sensed that deep historical changes were in the wind. However, such changes were not always for them. It was, however, acknowledged that many younger men coming into first-responder work increasingly rejected traditional levels of suppression of emotional vulnerabilities amongst men. Similarly, contemporary public mental health campaigns attempt to repackage vulnerability as consistent with hegemonic masculinity (Schlichthorst et al., 2018), insisting on men 'speaking up' about their emotional problems (Schlichthorst et al., 2019). However, this directive ignores the wide-ranging structures and relationships in which men are expected to operate. Structures may not only play a key role in generating vulnerability, but they may also be facilitative or inhibiting of the personal expression of such weaknesses. Certainly, the literature outlines how mental health help-seeking may be experienced by men as thwarted by professionals (Chandler, 2021; Ridge et al., 2011, 2021). The ways in which severe mental health problems (e.g., psychosis) appear not to be included in this new cultural directive to open-up is also important to consider. The newer emergent discourse of opening up is in contrast to earlier messages of toughness and general anti-femininity espoused for militaristic masculinities (Bulmer & Eichler, 2017), for which policing is most obviously connected. Nevertheless, even in the military, there are potentials for openness, caring and inter-dependency (Green et al., 2010), that were less evident in the policing narratives we collected.

Our findings question the ways in which emergency work is considered similar work, and thus where the implications for mental health remain undifferentiated. We suggest work cultures vary considerably in terms of institutional production, silences and discussions around mental health. Workplaces also vary in how to cast hegemonic masculinities, with distinctively different capacities to undo more traditional gender regimes (Ely & Meyerson, 2010). Study limitations include the cross-sectional nature of our work, and the small number of participants for each sub-group in offering up our comparisons. Additionally, our study was not able to elucidate the implications for women and other genders (e.g., trans men, non-binary) who aspire to this kind of first-responder work. Nonetheless, a strength of our research was the relatively anonymous telephone interviews which seemed to give men a licence to open-up to the interviewing researcher. Our findings can now be taken forward in instructing multi-site studies of men, gender and mental health.

#### **AUTHOR CONTRIBUTIONS**

Skaiste Linceviciute: Formal analysis (Lead); software (Lead); Visualization (supporting); Writing – Original draft (Equal). Damien Ridge: Conceptualization (Equal); Formal analysis (supporting); Methodology (Equal); Supervision (Lead); Visualization (Lead); Writing – Original draft (Equal); Writing – review and editing (Lead). Chantal Gautier: Conceptualization (supporting); Formal analysis (supporting); Investigation (Lead); Methodology (Equal); Project administration (Lead); Visualization (supporting); Writing – review and editing (supporting). Alex Broom: Conceptualization (Equal); Writing – Original draft (supporting); Writing – review and editing (Equal). John Oliffe: Conceptualization (Equal); Writing – Original draft (supporting); Writing – Original draft (supporting); Writing – review and editing (Equal).

#### **ACKNOWLEDGEMENTS**

We would like to thank all the men who came forward to tell their important stories, and in such honest ways. We also want to thank the anonymous reviewers whose insights helped us develop a better paper.

#### DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available on request from the corresponding author. The data are not publicly available due to privacy or ethical restrictions.

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#### **ENDNOTE**

<sup>1</sup> A standard way of organizing patterns of behaviour and relations, which are enduring, in this way of thinking an institution is made up of actions: https://sociologydictionary.org/institution/

#### REFERENCES

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. https://doi.org/10.1191/1478088706qp063oa

Brownhill, S., Wilhelm, K., Barclay, L., & Schmied, V. (2005). Big build. *Australian and New Zealand Journal of Psychiatry*, 39(10), 921–931. https://doi.org/10.1111/j.1440-1614.2005.01665.x

Bulmer, S., & Eichler, M. (2017). Unmaking militarized masculinity. *Critical Military Studies*, 3(2), 161–181. https://doi.org/10.1080/23337486.2017.1320055

Buys, R., & Marotta, V. (2021). Relational theories of encounters and the relational subject. *Journal of Intercultural Studies*, 42(1), 99–113. https://doi.org/10.1080/07256868.2020.1864968

Cachia, M., & Millward, L. (2011). The telephone medium and semi-structured interviews. *Qualitative Research in Organizations and Management: An International Journal*, 6(3), 265–277. https://doi.org/10.1108/17465641111188420

Chandler, A. (2021). Masculinities and suicide. Critical Public Health, 1–10. https://doi.org/10.1080/09581596.20 21.1908959

Connell, R.W. (1987). Gender & power. Polity Press.

Connell, R.W., & Messerschmidt, J.W. (2005). Hegemonic masculinity. Gender & Society, 19(6), 829–859. https://doi.org/10.1177/0891243205278639

Coston, B.M., & Kimmel, M. (2012). Seeing privilege where it isn't. *Journal of Social Issues*, 68(1), 97–111. https://doi.org/10.1111/j.1540-4560.2011.01738.x

Creighton, G., & Oliffe, J.L. (2010). Theorising masculinities and men's health. *Health Sociology Review*, 19(4), 409–418. https://doi.org/10.5172/hesr.2010.19.4.409

Dye, J.F., Schatz, I.M., Rosenberg, B.A., & Coleman, S.T. (2000). Constant comparison method. *Qualitative Report*, 4(1), 1–10.

Ely, R.J., & Meyerson, D.E. (2010). An organizational approach to undoing gender. *Research in Organizational Behavior*, 30(0), 3–34. https://doi.org/10.1016/j.riob.2010.09.002

Gair, S., & Baglow, L. (2018). We barely survived. *Aotearoa New Zealand Social Work*, 30(1), 32–44. https://doi.org/10.11157/anzswj-vol30iss1id470

Gautier, C. (2015). The psychology of work. Kogan Page Publishers.

- Green, G., Emslie, C., O'Neill, D., Hunt, K., & Walker, S. (2010). Exploring the ambiguities of masculinity in accounts of emotional distress in the military among young ex-servicemen. *Social Science & Medicine*, 71(8), 1480–1488. https://doi.org/10.1016/j.socscimed.2010.07.015
- Hammack, P.L., Frost, D.M., & Hughes, S.D. (2019). Queer intimacies: A new paradigm for the study of relationship diversity. *The Journal of Sex Research*, 56(4–5), 556–592. https://doi.org/10.1080/00224499.2018.1531281
- Herring, J. (2016). Health as vulnerability; interdependence and relationality. *The New Bioethics*, 22(1), 18–32. https://doi.org/10.1080/20502877.2016.1151255
- Holt, A. (2010). Using the telephone for narrative interviewing. *Qualitative Research*, 10(1), 113–121. https://doi.org/10.1177/1468794109348686
- Joiner, T. (2011). Lonely at the top. St. Martin's Press.
- Lajoie, C., Poleksic, J., Bracken-Roche, D., MacDonald, M.E., & Racine, E. (2020). The concept of vulnerability in mental health research. *Journal of Empirical Research on Human Research Ethics*, 15(3), 128–142. https://doi.org/10.1177/1556264620902657
- Lomas, T., Cartwright, T., Edginton, T., & Ridge, D. (2016). New ways of being a man. *Men and Masculinities*, 19(3), 289–310. https://doi.org/10.1177/1097184x15578531
- Lusher, D., & Robins, G. (2009). Hegemonic and other masculinities in local social contexts. *Men and Masculinities*, 11(4), 387–423. https://doi.org/10.1177/1097184x06298776
- Maaranen, A., & Tienari, J. (2020). Social media and hyper-masculine work cultures. *Gender, Work and Organization*, 27(6), 1127–1144. https://doi.org/10.1111/gwao.12450
- McCormack, M., & Anderson, E. (2010). It's just not acceptable Any more. *Sociology*, 44(5), 843–859. https://doi.org/10.1177/0038038510375734
- Mumby, D.K. (1998). Organizing men. *Communication Theory*, 8(2), 164–183. https://doi.org/10.1111/j.1468-2885.1998.tb00216.x
- Nishida, A. (2017). Relating through differences: Disability, affective relationality, and the US public healthcare assemblage. *Subjectivity*, 10(1), 89–103. https://doi.org/10.1057/s41286-016-0018-2
- Pilkington, K., Ridge, D., Igwesi-Chidobe, C.N., Chew-Graham, C.A., Little, P., Babatunde, O., Corp, N., McDermott, C. & Cheshire, A. (2020). A relational analysis of an invisible illness. *Social Science & Medicine*, 265, 113369.
- Ridge, D., Broom, A., Kokanović, R., Ziebland, S., & Hill, N. (2019). Depression at work, authenticity in question. *Health*, 23(3), 344–361. https://doi.org/10.1177/1363459317739437
- Ridge, D., Emslie, C., & White, A. (2011). Understanding how men experience, express and cope with mental distress. *Sociology of Health & Illness*, 33(1), 145–159. https://doi.org/10.1111/j.1467-9566.2010.01266.x
- Ridge, D., Smith, H., Fixsen, A., Broom, A., & Oliffe, J. (2021). How men step back-and recover-from suicide attempts. Sociology of Health & Illness, 43(1), 238–252. https://doi.org/10.1111/1467-9566.13216
- Schlichthorst, M., King, K., Reifels, L., Phelps, A., & Pirkis, J. (2019). Using social media networks to engage men in conversations on masculinity and suicide. *Social Media+ Society*, *5*(4), 2056305119880019. https://doi.org/10.1177/2056305119880019
- Schlichthorst, M., King, K., Turnure, J., Sukunesan, S., Phelps, A., & Pirkis, J. (2018). Influencing the conversation about masculinity and suicide. *JMIR Mental Health*, 5(1), e14. https://doi.org/10.2196/mental.9120
- Seidler, Z.E., Rice, S.M., River, J., Oliffe, J.L., & Dhillon, H.M. (2018). Men's mental health services. *The Journal of Men's Studies*, 26(1), 92–104. https://doi.org/10.1177/1060826517729406
- Tal, S.N. (2021). Mental health stigma, coping, and burnout in first responders. Alliant International University. Turnbull, B., Graham, M., & Taket, A. (2020). Hierarchical femininities and masculinities in Australia based on parenting and employment. *Journal of Research in Gender Studies*, 10(2), 9–62.
- West, C., & Zimmerman, D.H. (1987). Doing gender. *Gender & Society*, 1(2), 125–151. https://doi.org/10.1177/0891243287001002002

**How to cite this article:** Linceviciute, S., Ridge, D., Gautier, C., Broom, A., Oliffe, J., & Dando, C. (2022). 'We're welcomed into people's homes every day' versus 'we're the people that come and arrest you': The relational production of masculinities and vulnerabilities among male first responders. *Sociology of Health & Illness*, *44*(7), 1094–1113. https://doi.org/10.1111/1467-9566.13481