Searching for Masculine Capital: Experiences Leading to High Drive for Muscularity in Men

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Abstract

Studies on the drive for muscularity (DFM) have primarily been quantitative, focused on identifying correlates. Currently little is known about men’s experiences leading them to desire high levels of muscle and engage in behaviours to increase their masculine capital. Our purpose was to explore the stories of men with high DFM revealing the socio-cultural and personal factors leading to DFM and their search for masculine capital. In-depth life-history interviews and multiple in-the-field conversations were undertaken with twenty men (Mean age=28.45, SD=6.96, years) scoring ≥ 3 on the Drive for Muscularity Scale (Mean=4.30, SD=0.70). Men’s stories focused on a set of dysfunctional childhood and adolescent socio-cultural interactions, including forms of symbolic violence, between them and significant others. In these interactions men were exposed to dominant social narratives of masculinity, and through comparisons and reinforcement they identified discrepancies between themselves and these narratives. In late adolescence and early adulthood men came to believe that they lacked masculine capital. Men struggled to increase their masculine capital through engagement with other traditional masculine activities (e.g., sport) and driven by activating events, they compensated through DFM desires and behaviours. This study advances knowledge by revealing the socio-cultural and personal processes participants believed led to their high DFM. Findings disclose that men’s search for masculine capital may have led them to develop and maintain high levels of DFM.

Keywords: drive for muscularity, men’s experiences, masculine capital, identity, life-history interviews.
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The Western ideal male physique has become progressively more muscular (Pope, Phillips, & Olivardia, 2000). A significant proportion of men in Western societies perceive a discrepancy between their current and desired muscularity levels (Edwards, Tod, & Molnar, 2014). The drive for muscularity (DFM) construct reflects a desire to increase muscularity levels (McCreary & Sasse, 2000). Despite exercise and a muscular physique generally being associated with health benefits (e.g., lower blood pressure, increased self-esteem), high levels of the DFM have been linked to negative health consequences, including depression, muscle dysmorphia, and steroid abuse (Edwards et al., 2014). Considering the health consequences of high DFM, it is pertinent that researchers focus on experiences that sensitise some men to develop such desires.

Men’s desire to be muscular is of growing importance as it is a defining feature of contemporary masculinity (Pope et al., 2000). Hegemonic masculinity is the dominant discourse regarding the socio-cultural properties that men should have (e.g., a muscular body) and society often places unrealistic pressures on men to achieve these properties (Connell, 2005). That is, hegemonic masculinity represents a culturally idealised type of masculinity that is aspirational, but is unachievable for most men. Hegemonic masculinity is a multidimensional, ever evolving concept (Hargreaves, 1993) that manifests itself through the domination of one particular set of values over others and functions to subordinate other (alternative) masculinities. Connell (2005) referred to ‘masculinities’ to indicate the plurality of the concept and the multiplicity of its socio-cultural manifestation. One’s perception and acceptance of masculinity may be dependent on and informed by one’s taste, which is related to one’s social location (Bourdieu, 1986). Shilling (2013) noted the significance of using some of Bourdieu’s work in understanding the growing
pertinence of the body in high modernity, and the relevance of employing the concept of ‘taste’ and ‘capital’, and their relation to key aspects of masculinity.

Taste reflects the preferences that people develop depending on what is available to them, and may be seen as the conscious manifestation of, what Bourdieu terms, habitus (Shilling, 2013). The habitus is internalised mental or cognitive structures that are acquired through persistent exposure to particular social milieus, and are converted into dispositions (Bourdieu, 1986). Through these dispositions or schemes people generate ‘meaningful practices and meaning-giving perceptions’ (Bourdieu, 1986: p.170), and they may be viewed as a key aspect of one’s identity (Thorpe, 2010). Preferences are formed by capital developed in a range of social fields (e.g., at home, at school). Capital is, described by Bourdieu, the capacity to control one’s own fate and the fate of others, and may be identified as a form of power (Ritzer, 1996). There are many forms of capital (e.g., social, cultural), and the status of men in society is defined in relation to their access to relevant forms of capital (Jenkins, 1992). For men, demonstrating masculinity can be a form of symbolic capital (i.e., a form of prestige; de Visser, Smith, & McDonnell, 2009). Masculinity may be perceived as men’s acceptance and practice of hegemonic values, traits, and behaviours typically associated with being a man in late modern Western societies, such as: toughness, assertiveness, competency, dominance, physical strength, risk-taking, heterosexuality, and engagement in activities (e.g., sport) reinforcing these attributes (Connell, 2005; de Visser, 2009; McKay, Messner, & Sabo, 2000). When men strive to embody the hegemonic ideal, but perceive to lack some, or all, of its characteristics, they may experience marginalization and uncertainties about their masculine identity, and, in turn, may seek compensatory activities (de Visser et al., 2009). Men may achieve a viable masculine identity, however, without incorporating all of the practices associated with orthodox masculinity,
although the more traditionally masculine traits they exhibit, the more likely it is that they will be perceived as masculine (de Visser et al., 2009).

de Visser et al., (2009) termed men’s compensation for non-masculine characteristics as increasing “masculine capital”. Men may develop, dependent on the field, masculine capital by engaging in traditional masculine-typed activities (e.g., drinking alcohol) that offer masculine ‘insurance’ or ‘credit’ for their perceived and actual inadequacies (de Visser & McDonnell, 2013). Given the contemporary centrality of the body in the acquisition of status and distinction (Shilling, 2013), men have the tendency to improve their ‘masculine credit’ via the physical development of their body (de Visser et al., 2009). Of particular relevance here is DFM, which may reflect the desire for physical development of the body to increase the possession of physical capital in social fields (Shilling, 2013).

The concept of masculine capital may be appropriate to explore the experiences that sensitise some men to develop high levels of DFM. Specifically, because a muscular physique is a key component of a hegemonic masculine ideal and gaining muscle may provide men masculine credit (de Visser, 2009), then it is plausible that men’s search for masculine capital may stimulate them to develop a high level of DFM. Such analysis would be pertinent as the DFM has been correlated with various masculine-typed attitudes (e.g., Smolak & Stein, 2010). Researchers hypothesize that the growing importance of muscularity to men may be a response to greater gender equality and men’s decreasing capacity to control women and their own destiny (Mills & D’Alfonso, 2007). Men’s perceived inadequacy may lead to a desire for muscle because muscularity is a key attribute that distinguishes them from women (Mills & D’Alfonso, 2007). In terms of explaining DFM, there is mixed evidence for the “threatened masculinity” hypothesis (Hunt, Gonsalkorale, & Murray, 2013; Mills & D’Alfonso, 2007), implying that a desire to build
muscle may not exclusively result from a need to demonstrate masculinity and dominance over women, but it is also influenced by mass media (Pritchard & Cramblitt, 2014). For example, the contemporary rise in social media usage may be one factor that drives men’s body related attitudes (Fardouly & Vartanian, 2016). The threatened masculinity research, however, does suggest that some men conform to the masculine hegemonic ideal, and the DFM is one characteristic that facilitates them in displaying masculinity (Mills & D’Alfonso, 2007).

Most DFM studies have been correlational and quantitative, and have identified many correlates with the DFM in men (See Edwards et al., 2014). These studies, however, have not explored historical, personal, and interpersonal experiences in relation to the possession and development of masculine capital that may lead some men to desire a high level of DFM. Understanding men’s life-long journeys will extend current knowledge.

Some qualitative studies have examined muscular body-image related issues in men and boys, and have focused on general populations (Bottamini & Ste-Marie, 2006; Ryan & Morrison, 2009) or male athletes and bodybuilders (Galli & Reel, 2009; Klein, 1993, Sparkes, Batey, & Owen, 2012). These studies have often had different aims, and have not focused specifically on understanding the experiences that may sensitise men to develop high DFM. Similar to quantitative research, qualitative studies with general populations have repeatedly used samples of convenience. For example, Bottamini and Ste-Marie’s (2006) and Ryan and Morrison’s (2009) samples consisted of male students whose level of DFM was not measured. Therefore, it could be argued that such studies may not have selected men who have engaged in securing masculine capital by appropriate body transformations.

Other studies, focussing on bodybuilders and male athletes (e.g., Galli & Reel, 2009; Klein, 1993) have not examined the experiences leading to high DFM, but had different aims.
For instance, Klein’s (1993) ethnographic study highlighted factors leading men to become bodybuilders. Furthermore, various autobiographical and single participant life-history accounts exist on bodybuilders who have identified experiences that made them want to develop muscularity (e.g., Fussell, 1991; Sparkes et al., 2012). Although these studies contribute to the literature, they are limited by small sample sizes and by the number of stories. The current study extends knowledge by using life-history interviews focused on the experiences and processes related to developing DFM and purposefully selecting men with high DFM.

Despite the limited amount of DFM focused qualitative research, existing investigations provide insight into the factors leading some men to desire a muscular body (e.g., Klein, 1993). For example, Fussell (1991) noted that moving to a large city led him to desire a muscular body (i.e., masculine capital), because the urban environment made him feel physically vulnerable. Other qualitative studies allude to childhood interactions, such as family relations, particularly with the father, as a key factor (e.g., Sparkes et al., 2012). Furthermore, other acts of symbolic violence (e.g., bullying) seemed to drive men to desire a more muscular body (Ryan & Morrison, 2009). Symbolic violence refers here to the imposition of the dominant system and values of masculinity (Bourdieu & Passeron, 1990). This imposition is often ‘subtle and disguised but…effective in its impact and seen as legitimate’ (See Morgan & Björkert, 2006, p.444). A range of physical attributes (e.g., being short, and underperforming in sports) and personality characteristics (e.g., being shy, and feeling frustrated), which are noncompliant with dominant forms of masculinity and, thus, may trigger symbolic violence, seemed to drive men to desire muscle (Klein, 1993). It still remains unclear, however, how men describe the processes and how these perceived factors may have interacted to sensitise men.

**Purpose and Approach**
Narrative life-histories of men with high DFM were employed to advance knowledge. This approach has advanced knowledge in other body-related fields by revealing the experiences that sensitised individuals to develop specific pathologies (e.g., Papathomas & Lavallee, 2006). Due to the complexity of men’s experiences and reasoning behind high levels of DFM, narrative life-histories enable men to tell their own stories (Sparkes & Smith, 2014). These personal accounts provide a deep insight into men’s experiences, personal dispositions, and emotions (Smith & Sparkes, 2009). This approach helps provide detail to describe the multitude of events leading to high DFM. Understanding these processes may help practitioners identify ways to assist men to avoid obsessive DFM. The purpose of this study was to provide an in-depth exploration of how men storied their journeys to developing high DFM and the perceived processes that lead to and maintain their desire. Within this research purpose we were interested in identifying the: (a) people, (b) events, and (c) interactions that had shaped men’s experiences.

Method

Participants

The sample consisted of 20 men, and Table 1 presents the men’s demographic information (pseudonyms used). To be included, men had to achieve a score of ≥3, out of 6, on the Drive for Muscularity scale (DMS, McCreary & Sasse, 2000). The average DMS score in papers sampling UK men is 2.40 (SD=0.60) and our choice of selecting men with a score of three or above represents a high level of DFM in a UK male population (e.g., Swami & Voracek 2013, Tod & Edwards, 2013). The DMS measures the DFM and consists of 15 items with a 6-point Likert-type scale from 1 (always) to 6 (never) and is the most commonly employed measure of DFM (Edwards et al., 2014). Evidence demonstrates acceptable scale score internal consistency, test-retest reliability (7 and 14 days), and concurrent and discriminant validity.
The DMS total score was calculated by averaging the responses from all items (McCreary & Sasse, 2000). The average DMS score in the current sample was 4.30 (SD=0.70).

After gaining ethical clearance, initial participants (n=4) were recruited from a database collected by a large-scale quantitative project ([to be inserted after review (TBI)]). In [TBI] participants completed the DMS, those participants who reached the cut-off score for the inclusion in the current study were contacted. Other participants (n=16) were recruited via a snowballing method (Faugier & Sargeant, 1997), through conversations in gyms, and bodybuilding forums on social media sites.

The mean age of the participants was 28.45 (SD=6.96) years. Sixty-five percent of participants had obtained (n=11) or were studying for a University degree (n=2). Based on the Rose and Pevalin’s (2010) occupational classifications: 1 participant had a lower managerial occupation (e.g., educational consultant), 3 had intermediate occupations (e.g., software engineer), 4 were small employers or small account holders (e.g., gym owner), 7 had low supervisory or craft related occupations (e.g., train driver), 3 had routine occupations (e.g., security guard), and 2 were full time students. All participants were involved in strength and muscularity-based physical activities, including: 3 competitive bodybuilders, 7 non-competitive bodybuilders, 2 competitive men’s physique athletes, 2 fitness models, 1 competitive powerlifter, 1 competitive Olympic lifter, 1 competitive strong man, and 3 amateur rugby players. The 3 rugby players considered that their bodies and training regimes reflected those of a bodybuilder. Four men reported being current steroid users and one acknowledged previous use. Regarding marital status, 3 participants were married or engaged, 10 were in an intimate relationship, and 7 were single. Regarding sexual orientation, 19 men were heterosexual and 1 man was gay. All
participants were Caucasian with 16 identified as English and 4 as Welsh. All participants currently took protein supplements and consumed an average of 6 different supplements per week. They had been weightlifting for an average of 11 years, and currently lifted for an average of 5 and a half hours per week.

Procedure

To ground ourselves in the context, prior to and between interviews, [TBI] took various steps to familiarize himself with the worlds participants inhabited. These steps included multiple visits to gyms where participants trained, informal discussions with gym owners, frequent engagement with bodybuilding forums, and accompanying participants’ families to bodybuilding and powerlifting competitions. This engagement allowed [TBI] to become familiar with the context and build rapport with the participants, and adjust the language of the interviews to a dialogue used on a day-to-day basis in the gym environment. Many of the participants in the initial empirical stage befriended [TBI] over social media (i.e., Facebook). This communication via social media allowed additional rapport to be established prior to the interviews. Similar to the findings of Lunnay, Borlagdan, McNaghton, and Ward (2015), we believe that this reciprocal sharing of information prior to interview allowed for a greater participant-researcher familiarity and led to a richer discussion. Participants also shared information that they had missed during the interview or had occurred following the interview over social media.

The interviews started with broad questions (i.e., what is an acceptable body for a man, what is your ideal body, what experiences made you think about your body in this way?), and from there, [TBI] let the conversations flow and followed up with prompts that allowed participants to expand on their experiences. In the interviews participants were presented with a timeline to record a graphic sequence of their experiences that they believed led them to have a
high DFM (Adriansen, 2012). This timeline was co-created by [TBI] and the participants through the interview, and helped them identify what had happened at specific points in their life and to contextualize their experiences. Participants were instructed, during the interview, to write down experiences on the timeline that they believed were significant. When [TBI] identified experiences during the interview participants were asked “would you like to record these on your timeline?” [TBI] kept a reflective log containing field notes, interview notes, and interview reflections. These documents were shared and discussed in frequent research team meetings. Peer reflection helped [TBI] identify and talk through some of the assumptions that he had held, and allowed him to openly make sense of events that he had witnessed, and discuss some of the participants’ responses and (re)actions.

Interviews occurred at convenient times and locations for the participants. Table 1 identifies the counties in which participants lived and were interviewed. In-person interviews were conducted primarily in the participants’ homes or in the gym environment. To fit in with participants’ lifestyles, two interviews were conducted via Skype (Hanna, 2012). This interview method was preferred by these participants, because it did not disrupt their daily routine. Following the first interview we turned each participant’s transcript into a flow diagram, detailing the story that they had told, and returned them to respective individuals. A diagram allowed participants to see our interpretation of their stories, was less time consuming for them than re-reading interviews transcripts, and allowed them to add to these graphics. We revisited all participants and some of these conversations were formal (n=2), but the rest were informal through social media and in the gyms where they trained. This member checking process helped us increase our understanding of the participants’ lives. In the informal environment, we often collected additional rich data from the participants.
Research Credibility

Consistent with Sparkes and Smith’s (2014) guidelines, we identified a number of principles to guide our work. We aimed to: (a) ensure we understood the men’s lives, (b) demonstrate to the men that we cared about their experiences, (c) provide a story that advanced knowledge, (d) provide a story that other researchers would care about, (e) uncover our assumptions, (f) provide information that resonates with readers’ personal experiences, and (g) provide useful information for practitioners. Based on these guiding principles, the relevant criteria we decided to address included: credibility, rich rigor, affective, resonance, and significant contribution (Sparkes & Smith 2009; Sparkes & Smith, 2014). We ensured we met these criteria by: (a) having specific inclusion criteria to identify men with high DFM, (b) building trust and rapport with the men and their families, (c) engaging in member checking processes, (d) performing an audit trail, (e) prolonging our engagement in participants’ environment, (f) becoming aware, through frequent team meetings, of the biases we held, (g) presenting the narrative diagram in academic circles, (h) discussing the narrative diagram in the field with: strength and conditioning practitioners, male bodybuilders, and male weight trainers, and (i) sharing the narrative diagram on bodybuilding internet forums.

Analytic Process

Interviews were transcribed verbatim and a thematic narrative analysis was undertaken following Sparkes & Smith’s (2014) methodological steps. Initially [TBI] immersed himself in the stories the men had told, identifying key themes, including: the people, events, and interactions that had shaped the men’s experiences. To make sense of these experiences [TBI] adopted an abductive approach to the analysis of men’s narratives (Tavory & Timmermans, 2014). Frequently researchers adopt an inductive or deductive approach to the analysis of
qualitative data (Sparkes & Smith, 2014). The abductive approach involves both inductive and
deductive processes: by constantly moving between everyday meanings and theoretical
explanations, it involves a creative process of interpretation when applying theory to
participants’ experiences (Ryba, Haapanen, & Ng, 2012). In this initial phase [TBI] revisited all
participants and used member checking to expose our interpretations to their review. The
member checking process helped us to further understand the stories that the men had told.
Through this process, participants were involved in the triangular crystallization of their stories
and the key emergent themes. To track the narrative, men’s stories were plotted on a diagram
that represented a master narrative of the processes leading to high DFM for all participants.
Diagram crystallisation was reached through a range of rigorous data-related discussions in our
research team, which enabled the refinement of the identified processes. Crystallisation is similar
to the consensus building process achieved through triangulation, but is not rigid and fixed, and
realises that there are an infinite number of lenses and multiple theoretical approaches through
which to view the men’s stories (Richardson, 2000). A graduate student performed an audit trail
on our data, themes, and interpretation. We shared our final diagram with participants and gained
feedback through a member checking process. This process ensured that our representation of the
men’s stories was reflective of their experiences.

**Results**

We developed one master narrative which is represented in Figure 1. The men’s stories
primarily focused on a set of dysfunctional socio-cultural interactions, including symbolic
violence between themselves and significant others in their childhood and adolescence.
Specifically: (a) with their fathers, (b) being bullied and abused by significant others, and (c)
peer and sibling comparisons. These interactions occurred in three prominent fields: (a) in their
family, (b) at school, and (c) in sports. In these interactions men were exposed to dominant social narratives of what it means to be a man, and through comparisons and reinforcement these experiences resulted in participants identifying that they did not conform. In late adolescence and early adulthood, the men came to believe that they lacked masculine capital and related symbolic capital. Men struggled to increase their masculine capital through engagement with other traditional masculine activities (e.g., sport). Driven by activating events, they developed a DFM because they believed that a muscular body would enhance their masculine credit. Men’s stories identify that the DFM is related to making certain choices that increase the likelihood that muscularity will be enhanced (e.g., weight training, substance use, and career choices). We explore each of the sources of the men’s perceived lack of masculine capital in the next section.

**Childhood and Early Adolescent Experiences**

**Interactions with fathers.** In the family environment, many men spoke of a dysfunctional relationship with their fathers. For example, 25% of the men identified how their fathers were not supportive and often absent (e.g., working away, from separated families), and 30% of men spoke of how their fathers expressed disappointment and ridiculed them. Steve revealed how his father’s acts of symbolic violence influenced his feelings of inadequacy:

> Now the one thing about my dad, in terms of his humour and the way he spoke to me it was always very depreciating, you know. I am one of six kids, … I was the second born, I was the first boy and his humour … It was just quite depreciating you know, it is very critical…. you know looking back now I know most of it was just humour, at the same time when it is over and over and over it kind of reinforces that you are not good enough.

Seventy percent of the participants identified distinctions between themselves and their fathers. Dan reflected:
My dad was a PE teacher for many years and I always felt, we had basketball in common and I was good at basketball, but apart from that I felt like I wasn’t, I felt like he would always be a bit ashamed of me, not to get too deep, but basically just because he was a PE teacher, he was active, he was very fit, and he’s a very fit bloke.... I would always speak to my mum more when I was younger because I just felt like I just felt like I wasn’t being judged...I always felt like I was a bit of a disappointment to him.

In every case, the father set a standard of what it takes to be a man, and the participants felt that they did not meet those dispositions. Russell identified his father’s characteristics: “[my dad was a] big, burly manly man and the ironic thing was … I was [the] smallest in the school”. Austin explained his father’s role: “[my dad was] the chief executive of [a foreign telecoms company]…[and I am] massively not like my dad… [He is] a ridiculous academic… and I had a lot of support tutors.”

When discussing their parents, the men predominantly focussed on interactions with their fathers. Their mothers were only mentioned when they were supportive of their son, the mother was sick, or when the mother was abused by their father. Moreover, through these early interactions the participants identified gender norms for men (e.g., the breadwinner, strong, the successful parent, and violent towards women) and woman (e.g., caring, supportive, and the housewife). The men’s perceived gap between themselves and masculine specific norms, communicated to them by their fathers, influenced their interactions in other fields.

**Peer and sibling comparisons.** To gauge their social selves, 70% of the men told stories of how they compared themselves to siblings and peers. In these comparisons men identified discrepancies between their own and other men’s masculine capital. Dan said: “I was
pigeonholed as being a small, slight, skinny sort of lad compared to my other mates who were big. I kind of felt inadequate.” Carl, whose younger brother had hit puberty before him, reflects:

He was good at sport, he was, yeah, very good at sport, he was powerful, girls liked him, all that sort of stuff I suppose. Um, yeah and nobody messed with him and that was just the way it was. Whereas I was completely opposite; I was quiet sort of. I was always kinda sporty, but I was very aware that I was quite small.

At an early age participants identified distinctions between themselves and the standards of masculinity. Rhys reflects that he felt less of a man because he lacked capital to attract female attention, a key aspect of masculinity:

[Male classmates] were better than me and they were smarter than me and everything was better about them than me. And I think that made me think I have to get better than them or I am not going to be anything . . . one of them was this guy that played the guitar and all the girls loved him and he had this long hair and stuff and I was like “for god sake.” You know one of them was the funniest guy you have ever met and everyone loved him because of that, and I just had nothing and I thought well I don’t really feel like much.

The participants’ distinctions were consistent with Festinger’s (1954) social comparison theory. Festinger (1954) argued, as part of the identity formation process, that individuals compare themselves to others to process social information and establish their social self. Comparisons can be upward (i.e., comparison to one perceived as superior) or downward (i.e., comparison to one perceived as inferior). The men’s comparisons were upwardly focussed and resulted in negative emotions. Festinger (1954) suggested that an individual’s views are influenced by the consensus of the group to which they belong (e.g., men focused on manly dispositions from significant others to which they did not conform). When social messages reinforce these
dispositions they are often internalised by individuals (i.e., become their habitus). The men’s stories highlight how their comparisons led them to internalise what they were not (e.g., ‘I am not powerful’, ‘I am not smart’, ‘I am not cool’, ‘I am not academic’), thereby identifying a gap between themselves and dominant standards of masculinity.

**Bullying and physical violence.** In the school and home environment, 80% of the men identified that their inadequacy was reinforced through instances of bullying (including both physical and symbolic violence). Carl explained his experiences: “I am a bit of a stereotype [of a man who lifts weights] I am afraid, I was bullied, which was just the way it was.” Joe also expressed his experiences:

> It [bullying] was both physical, verbal, crikey, I think it varied from one occasion I ended up bruising my spine because I got thrown onto solid concrete, because obviously when you are that short or kind of weight-wise, you are not that heavy, so you tend to find that you can be launched.

In every case men attributed bullying and violence to their inadequate physical stature. Ben identified, “I got bullied… because I was very, very underweight… and [I] got constantly told [that] I was anorexic”. Frank suggested that he got bullied because he was ‘quite small, I was probably seen as an easy target you know, small prey. Like I can smash Frank because he is small. I will take his money, his lunch, whatever.” Some men indicated that they sought help from their fathers, but were made to feel even more inadequate. Mike reflected on his attempt to gain support:

> In fact when I told my Dad he actually started to call me the names I was being called at school because he thought it was quite funny ... That makes him sound like a twat, but I don’t think he actually knew, he didn’t know how to relate, how to cope with it, I think he saw it as a joke.
Men’s narratives highlight that their experiences resulted in identity uncertainty, and as adolescents they began to search for who they could or should be. Identity development theory suggests adolescence is a pivotal period for identity formation (Erikson, 1968). Many of the participants identified sport participation as one way that they aimed to achieve an appropriately masculine identity. Derek noted: “I was kind of trying to find an identity that people could relate to and most of the cool kids happened to be rugby players [so I played rugby]”. For many of the men, however, their inadequacy was reinforced through their engagement with sport.

**Degrading sport experiences.** Fifty percent of the sample identified that their sport engagement was met by acts of symbolic violence such as degrading comments and evaluations from peers and educators about how their bodies were inadequate. For instance, Charlie recalls how he lacked masculine capital on account of his small stature:

> I was playing rugby in school once and I managed to score a try … being agile I could just dart past people and the bigger lads tried to tackle me and failed and I remember the coach, rather than saying “congratulations that was awesome, well done [to me],” he got the other three lads who were like twice my size and said “what the hell are you playing at, this lads half your size [he] shouldn’t be able to do that.” [He said to the other players] “[I am] disappointed in you; he’s the smallest kid on the pitch,” and you know I remember thinking “I’ve got no place for that” [Charlie quit playing rugby].

Despite Charlie proficiently engaging in a traditional masculine sport, it did not afford him masculine capital to compensate for his inadequate physique. Another instance of symbolic violence associated with sports was recalled by Dan:
I went to sixth form and went for rugby trials and went into the changing room and they were like “na… sorry mate; football training is the next day” sort of thing. Something along those lines. It made me feel quite small and a bit embarrassed.

Men’s physical limitations led to other outcomes in sporting environments. Anthony reflected on his experiences of being dropped from elite junior water polo because of his lack of masculine physical attributes:

I played for Great Britain when I was seventeen. I got into the squad, but I could never push myself into the starting team and I was always told that was basically because I didn’t have enough sort of oomph about me, like strength. They said that I was always a bit intimidated rather than being the intimidator, so that was a bit of a fact because I didn’t get into the [men’s] squad and I ended up losing [getting dropped].

These experiences reinforced the men’s substandard physical stature and their lack of masculine capital. The men’s stories highlight that degrading experiences can happen in a range of fields (e.g., at school, at home, in sport) where social interactions lead them to believe they did not meet the standards of masculinity.

**Recognition of lack of capital.** As a result of the participants’ experiences at the end of adolescence, 65% of men identified that they had various negative self-schemata, which formed their habitus, such as: (a) I am a failure, (b) I am not accepted, (c) I am not respected, (d) I am inadequate, (e) I am incompetent, and (f) I am not in control. Mike identified: “I just felt I was losing control a lot of the time. That would be [due] to me feeling not competent, [not being] a competent person. I feel in control now. I wish I felt in control then.”

The men often linked these beliefs to the gap between themselves and the dominant view of masculinity. Paul explained his lack of masculine capital: “I didn’t feel like a man. I felt like a
bit of a… fanny (!)”. Consistent with developmental theory, the formation of identity is heavily influenced by what individuals mean to themselves and significant others at the end of childhood (Erikson, 1977). The men had strong beliefs of what they were not, but they usually did not know who they were, or what they could be. At the end of adolescence the men were experiencing identity confusion (Erikson, 1977; Marcia, 1966).

Late Adolescent and Early Adulthood Experiences

Activating events. Activating events represent experiences that stimulate reflection on men’s lack of masculine capital, and related symbolic capital, in late adolescence and early adulthood, and resulted in their decision to change. In late adolescence and early adulthood, participants experienced multiple activating events. As illustrated in Figure 1, activating events that stimulated reflection on their lack of masculine capital triggered a high DFM and associated behaviour in an attempt to increase their masculine capital. Fifty-five percent of men identified a specific event that trigged their DFM. For others, it was a combination of multiple activating events that triggered their DFM. Although participants discussed multiple behaviours and desires aimed at helping them control their lives and/or cope with their perceived inferiority (e.g., alcohol use, disordered eating), the DFM was their primary action, because it allowed them to address their perceived lack of masculine capital. This is consistent with de Visser and McDonnell (2013) suggesting that physical activities offer greater contemporary physical capital than other behaviours such as alcohol abuse.

Men’s stories reveal the process of compensation through the DFM as cyclical and dynamic. Participants’ perceptions of activating events as negative or destabilising (e.g., divorce) reinforced their lack of masculine capital, and triggered higher levels of DFM compensation. Steve highlighted how a broken relationship was his destabilising event that triggered his DFM:
I would say definitely with my ex, um… as the relationship fell apart for the last year or so, I was just told everything is bad about me and you know “you are less than a man and you are pathetic,” and she would even say to me if you were a man you would hit me”. You know, like and “look at you, you are weedy and pathetic. You are just not a man, you know and your daughter’s not yours, I was screwing around behind your back,” and you are thinking “ok I am going to tell you what, I am going to show you, I am going to become more than a man, you know.”

In contrast, events participants perceived as positive or stabilising (e.g., forming intimate relationships) allowed them to gain masculine capital, resulting in lower levels of DFM compensation. Derek identified his stabilising event: ‘with a baby due in six weeks [my role now] is to provide for my family, to make sure that [my partner] and my child is supported’. Alistair reflected on his stabilising experience:

I got a bird [girlfriend] and I am settled and stuff, you know. I probably am more comfortable with the fact that I can relax on those sort of things. If I was single and hitting the party scene every week still, you know, maybe I wouldn’t have come off the gear [steroids]. Maybe I would still be doing that . . . [I] probably venture a guess and say probably it would. If I was single I probably would be less settled and less comfortable.

From an identity perspective, in-line with research on athletic identity, these positive experiences may allow for a broadening and establishing of the men’s identity through other means (e.g., becoming a father) and reduce their focus on their muscular selves (Papathomas & Lavallee, 2010). These experiences may have also broadened the men’s perspectives of what it means to be a man (e.g., a man can be a good father) and how they may meet the standards of hegemonic masculinity by gaining masculine capital in alternative domains.
DFM Continuum. The final part of Figure 1 presents the cycle of DFM compensation, which is a continuum from intimacy to isolation. For example, many men identified how they initially ‘played around with weights’ which led them gaining some masculine capital, such as increasing social standing, obtaining greater attention from significant others, and being able to play sport. These benefits were field specific, however. Bourdieu identifies that a field is a social arena within which one struggles for social position (Jenkins, 1992). Each field (e.g., school, the gym) has idiosyncratic values and structure which is both the product and producer of field specific habitus (Jenkins, 1992). Sam identified the capital achieved from developing muscle in the school environment:

My body was changing and getting bigger, more muscular. I was confident and people changed around me. When I was sitting in Maths I would have girls, like really good looking, pretty girls in school sitting next to me…before [I started training] I was like a nerd kind of thing, skinny and kind of getting bullied. So it went from being bullied to like the best looking girl sitting next to me: amazing.

When in the gym field, however, men were exposed to a gym specific habitus (e.g., the acceptable body for a man in the gym). Andrew identifies, “when I started in the gym there were guys who had been training for years. They were a lot bigger [than me], and it was quite intimidating.” The larger the muscle in the gym the more symbolic capital the man holds. Men’s stories highlight that engagement in DFM-related behaviour became its own activating event. Through the development of muscle, men reflected on their muscularity levels, manifesting in higher levels of the DFM, thereby becoming a cyclical process. Anthony identified this perpetual cycle:
I honestly think the perception of training doesn’t help your perception of your body at all. Because I think once you get into training and striving for perfection you have never got anything that you like, you always want more. The day you start lifting is the day you will forever be small (!).

In the gym the men identified that they developed friendships, became accepted, respected, and they narrowly established who they were. The gym and increased muscle allowed them to form an identity (e.g., ‘I am a bodybuilder’), and escalated their DFM desires and behaviours. Men had to maintain their masculine capital in the gym, however. Men’s stories highlight that through each cycle of the feedback loop they were willing to engage in riskier behaviours to enhance muscularity. Gavin explained how through this feedback loop he became a persistent steroid user:

Obviously everyone says gear [steroids] are going to make you massive, so you think well “I will try it and see what happens, I will just do the one course and that will be it” and I think everyone must say that… I remember doing my first couple of jabs and thinking “jeez I am going to wake up in the morning and I will be ginormous,” and obviously you are no different whatsoever and by the end of the course you have put on a few pounds and you think well I got something out of it but not what I thought I would get so obviously have a break and start again. As soon as you come off, in your head you are the skinniest person in the world because for some reason putting that gear in your arm or anywhere, in your head it makes you feel better straight away…. That’s why I don’t come off now.

Men’s reaction to activating events varied. Some activating events, for example, seemed to make men train more (e.g., moving to a different social location), whereas more traumatic
events (e.g., physical injury) accelerated men’s DFM compensation, because of the stronger perceived threat to their masculine capital and narrow muscular identity. For example, three men discussed their experiences after recovering from injuries that stopped them from training. Rhys reflected:

I was recovering from an operation and … I was cleaning myself and I didn’t dare look in the mirror. I knew it was there but I didn’t dare look at it [my loss of muscularity], then when I finally looked at it, I lifted up my arms just to see what I actually looked like and I couldn’t stand it. [I thought] that’s not me, that’s not me at all.

When able to train again the men reflected on how their bodies had shrunk. This muscle loss strengthened their perceived lack of masculine capital and the need to re-establish their identity. Kiron, after recovering from an injured neck, reflected: “[I was] massively frustrated…[the] scales were telling me I was back up to 15 stone, but looking at myself I thought there is no way I am that [size again].” This new level of uncertainty manifested in risky behaviours they had not previously undertaken, as illustrated by Paul:

I went through a window and that knocked me back massively. It was three months of no training and obviously the body repairs itself so I lost about two stone, two and a half stone and it may in fact be even more than that. I was about 11 ½ to 11 which was the smallest I have ever been for about five years, … I looked in terrible shape so that kind of prompted the use of steroids … I was so down about myself, I didn’t see any recovery at the time so I guess that obviously give me that nudge that I needed to go into it then.

At higher levels of DFM-related engagement the men became more socially isolated than at lower levels. They avoided social relationships because these interfered with the maintenance of a muscular physique, as Rhys explained: “It [socialising] doesn’t help me, it doesn’t help me
with what I am trying to do. It is quite a sad thing to say when you think about it, but that is how I think.” Rhys continues:

I don’t have a lot of friends anymore…and my ex-girlfriend used to joke about it and she was like “oh you know, you going out with your mates tonight?” And I was like “na na of course I am not, I haven’t got any, have I?” We use to joke about it, but I really don’t.

The men only formed relationships with people who reinforced and supported their DFM. Gavin identified how his partner had changed her behaviour to accommodate his:

They say who you go out with is sort of who you grow into. And obviously she [Gavin’s partner] used to train a little bit, but when she got with me, because that is my life, she was obviously looking and thinking “well yeah,” she liked the shape of the girls and that so she has got more into it and probably if she wasn’t with me she wouldn’t be quite as into it as she was. So I think that’s probably impacted on her quite a bit.

Several men identified how they struggled to form and maintain relationships because of the time needed to pursue their DFM. Kiron reflects, “I remember I was training every day, there wasn’t any rest days and there was always complaints [from my ex-girlfriend that] I spent too much time in the gym”. Overt heterosexuality (as conveyed by being in a heterosexual relationship) has been identified as a particularly important source of masculine capital (e.g., de Visser & McDonnell, 2013), whereas for some men in this study, it did not provide sufficient capital; muscularity was more valued. The reason, however, why many men have not formed and maintained relationships may also reflect their identity issues. Erikson (1968) identifies that true intimacy with others can only occur when one’s identity is stable. These men foreclosed their identity (Marcia, 1966) on one thing: muscularity. This narrowness only allowed them freedom to form relationships with people who bolstered their identity. Men’s stories suggest that people
who challenged their narrow muscular identity made them confront something of which they were afraid. Theory suggests, because of the narrowness of their identity, that these men may struggle to form interpersonal relationships and retain a strong sense of isolation (Erikson, 1968; Marcia, 1966). Drew reflected:

If I see a girl, two-three weeks, whenever they text you are always in the gym, ninety five percent of them have said, “[I] have text you [and] you are always in the gym and you are addicted.” Quite a few have said “you are addicted to the gym, you train too much.” [I say] “hang on a minute, you have obviously seen me in the club or something and thought ‘oh he looks alright.’ That’s the reason you have got in touch with me”, and then they are like “no you go too much.” So yeah, well fuck off then. That’s me like, I will ignore it. It doesn’t bother me.

In summary, men’s stories highlight that without stabilising events, DFM-related behaviour becomes a self-perpetuating cycle of compensation, resulting in increased isolation.

**Discussion**

We examined men’s journeys towards high DFM to gain greater insight into the socio-cultural and personal experiences that lead to such desires. In each case, men’s stories focussed on dysfunctional interactions in their childhood and adolescence that led to negative self-schemata. With subsequent activating events that stimulated reflection on their lack of masculine capital, men compensated through DFM desires and behaviours. We present a diagram that provides novel knowledge advancements in several ways.

First, we revealed the process by which dysfunctional gender specific childhood experiences led men to believe that they lacked masculine capital. Second, we revealed how men may use the DFM to gain masculine ‘credit’ or ‘insurance’ (de Visser et al., 2009; de Visser &
McDonnell, 2013). Exposing these processes helps identify the value of using some of Bourdieu’s concepts in understanding the development and sustainment of high DFM. Bourdieu (1986, p. 101) expresses the interaction between field, capital and habitus in the equation:

\[(\text{habitus}) \times (\text{capital}) + \text{field} = \text{practice}\].

Men’s narratives support this interplay, specifically, during childhood and adolescence men were exposed to a gender specific habitus, and through comparison and reinforcement, in a range of fields, these norms formed the men’s unconscious schemata. Against these hegemonic dispositions men evaluated their own masculine capital, resulting in identity confusion and negative self-schemata in adolescence. When men experienced activating events that stimulated reflection on their inadequate levels of masculine capital, men adopted a practice (i.e., DFM) that would allow them to compensate for their inferior masculine capital. Similar to previous research, engagement in a typically masculine health-related behaviour (i.e., DFM) allowed men to gain some ‘credit’ (de Visser et al., 2009; de Visser & McDonnell, 2013) or masculine capital. Previous research suggests practitioners should target their interventions to help men develop their masculine capital through healthy masculine behaviours (de Visser & McDonnell, 2013). Healthy masculine behaviours may be identified as activities that allow men to deal with their situation. de Visser and McDonnell (2013) identify that these behaviours may include elements of physical activity and social/prosocial interaction (e.g., surf lifesaving). It is unknown what level of the DFM, or other masculine typed behaviours (e.g., sports participation), are health-enhancing and what level are health-compromising, and interventions may be better targeted at challenging the hegemonic masculine dispositions through which men evaluate themselves.

Third, the formation of a high DFM reflects developmental processes and developmental theory informed the presented diagram. Notably, the timeline of the men’s experiences has
parallels with Erikson’s (1959) psychosocial development theory. Erikson’s theory focuses on identity development and men’s stories revealed how they experienced challenges in their masculine identity formation, resulting from negative self-schemata at the end of adolescence or early adulthood. By interpreting DFM as being part of a person’s identity, we can appreciate why the DFM may be related to psychological disorders. Identity related schemata appear to be a central feature of both psychological disorders (e.g., depression, disordered eating) and the DFM (c.f., Papathomas & Lavallee, 2006). To date, DFM researchers have not viewed the desires as being tied to self-identity. Additional research exploring the role of the DFM within self-identity may help extend insights generated in this study. Further, for practitioners, interventions targeted at men’s identity focussed schemata may provide a possible avenue to help those negatively affected by their DFM.

Forth, we identified that the DFM is in a continual state of flux, a novel advancement in DFM research. This state of flux is dependent on the interaction between the field (activating events and current-historical beliefs) and the individual. The development of DFM was initially seen by these men as a means to an end. Consistent with Bourdieu (1986), however, the masculine capital obtained by the DFM is field specific and may not be transferable to other cultural domains. Activating events that triggered men to increase masculine capital in other areas of their lives may reduce the need for DFM compensatory practices (e.g., becoming a father). Qualitative longitudinal research may add to knowledge by providing further insights into how this flux influences men’s lives, such as why some men with high DFM, but not others, become isolated. These studies may include men’s significant others (e.g., their parents, partners, or previous partners) because these individuals may provide additional perspectives into the consequences of this flux on men’s lives.
The master narrative emerged from our entire sample, but we acknowledge that others may exist. Future investigation is needed to examine the presence of other DFM-related narratives of men and to explore similar processes in relation to women (e.g., female athletes, Howells & Grogan, 2012). Our purposive sample included participants between the ages of 20 and 44 years, further research is needed to explore the narratives of men from different age groups. All participants in this study were Caucasian and from the United Kingdom, the processes leading to high DFM in relation to men from other ethnic backgrounds may provide a separate set of practices that we have not identified (Swami, 2015).

In conclusion, the current study explored men’s journeys towards having high DFM. The results add detail to the skeleton of knowledge on the DFM and provide a plausible diagram that may stimulate future research. Further understanding of the men’s experiences of the DFM may assist researchers and practitioners to identify strategies to help men who are negatively affected by their extreme obsession with muscle.
References


Table 1. Participant demographics and lifting category.

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<th>Name</th>
<th>Age</th>
<th>Years lifting</th>
<th>Marital status</th>
<th>Profession</th>
<th>Lifting category</th>
<th>Interview location</th>
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*England, United Kingdom; **Wales, United Kingdom.
Figure 1. Master narrative identifying the experiences leading to high drive for muscularity in men.

- **Social-cultural fields**
  - Non-normative personal characteristics
  - Dysfunctional socio-cultural interactions

- **Resulting lack of masculine capital**
  - Identity confusion
  - Negative self-schemata

- **Activating Events**
  (a) Lead to an increase in compensation (e.g., relationship break-up)
  (b) Lead to a decrease in compensation (e.g., becoming a father)

**Isolation** ➔ **Drive for muscularity compensation** ➔ **Intimacy**