

Male Body Image in Aotearoa New Zealand: A Qualitative Interview Study

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Contemporary literature indicates that the muscular and lean male physique is becoming increasingly idolised, and subsequently, the experience of male body dissatisfaction and eating disorders is increasing. However, there is a lack of research on this topic in Aotearoa New Zealand. The current study explored how males in Aotearoa conceptualise body image and experience body dissatisfaction. Individual interviews were conducted with 15 male university students from Aotearoa, aged between 20 and 31 years old. Five themes were identified using reflexive thematic analysis. Together, the themes highlight the influence of masculinity norms in the context of body image, which subsequently perpetuates stigma and decreased awareness of male body image concerns. Further, the negative impact of Western beauty standards on body image for indigenous and minoritised cultures in Aotearoa is illustrated. The research implications are subsequently discussed.

Keywords: *Body image; Ethnicity; Muscularity; Males; Masculinity; Social comparison*

INTRODUCTION

Body image refers to a person's perceptions, feelings, and thoughts about physical appearance (Cash, 2004; Grogan, 2021; Muth & Cash, 1997). Qualitative research has provided insight into the increasing value placed on male appearance and the gendered nuances regarding body image. For males, being muscular and lean is consistently reflected as the dominant ideal, represented as young, tall, tanned, toned, and muscular (but not overly muscular). This ideal also includes a strong jawline, a full head of Caucasian hair, blemish-free skin, no glasses, and straight teeth (Grogan & Richards, 2002; Jankowski et al., 2018; McNeill & Firman, 2014; O'Gorman et al., 2020; Tran et al., 2020). Males recognise that this ideal is unattainable and unrealistic, but at the same time, it is perceived as the embodiment of masculinity and thus important to achieve (Jankowski et al., 2018; O'Gorman et al., 2020).

Although principally universal, qualitative research has highlighted that body image ideals vary across age, ethnicity, gender, sexual orientation, and culture. For example, older males suggested their ideal body image was to look 'normal and average', focusing on physical health rather than looks; this was in contrast to younger males who wanted to achieve the ideal body for looks and attraction (McNeill & Firman, 2014). Concerning sexual orientation, gay and bisexual men report that there are subcultures of body image ideals within their community, such as a 'twink' (young male who is thin and hairless), a 'hunk' (older male who is muscular), and a 'bear' (male with larger body size and more body hair) (Fawcner & McMurray, 2002; Tran et al., 2020). Finally, reflecting the intersection of sexual orientation and ethnicity, ethnoracialised gay or bisexual men report that these body types (e.g., 'twink') do not accurately represent what they idealise (Brennan et al., 2013).

Sociocultural influences, such as the media, peers, sexual partners, and family, play a ubiquitous role in

propagating these ideals, which can result in internalisation and social comparison (Ryan & Morrison, 2009). There are mixed qualitative findings regarding the salience of each source for males. Some studies have found that peers are the most salient influence due to the desire to fit in (O'Gorman et al., 2020), or a sense of competition (Grogan & Richards, 2002). Conversely, Jankowski et al. (2018) found that young males in the United Kingdom perceived mass media to have the biggest influence on body image. Furthermore, a qualitative study with gay and heterosexual men found that for some men, media was the biggest influence, while others perceived peers as the biggest influence (Morgan & Arcelus, 2009). Regardless of the source of influence, a discrepancy between one's ideal and actual body image can result in dissatisfaction and poor psychological and physical health (Thompson et al., 1999).

To address this discrepancy, males may engage in various behaviours. For example, males consistently discussed strict dieting (e.g., high protein, low fat and low carbohydrate), and deviation from these diets resulted in strong feelings of guilt (Fawcner & McMurray, 2002; Jankowski et al., 2018; Lamarche et al., 2018; Morgan & Arcelus, 2009). Exercise and supplements (e.g., creatine) were also seen as an important means to improve body image (Morgan & Arcelus, 2009). O'Gorman et al. (2020) also noted that some males engage in steroid use to change their body image. Males from ethnic and sexually minoritised groups also reported the use of diet pills and laxatives (Tran et al., 2020). Despite the pervasiveness of body dissatisfaction and engagement in body-change behaviours, there is a consistent yet complex pattern in the way that males minimise and discount body image and body image concerns (Jankowski et al., 2018; Morgan & Arcelus, 2009).

Analysis of male accounts highlights that body image and body image concerns are perceived as 'women's issues' and thus 'taboo' to discuss (Grogan & Richards, 2002; Hargreaves & Tiggemann, 2006; O'Gorman et al.,

2020). Masculinity norms are perceived as a major barrier to such discussions, particularly when it comes to seeking help (O’Gorman et al., 2020; Whitaker et al., 2021). Males have noted that discourse about body image is often expressed through humour, bullying, and teasing, which allows one to avoid being positioned as ‘feminine’ or ‘narcissistic’ (Grogan & Richards, 2002; Jankowski et al., 2018). Men’s minimisation of body image issues can have flow-on effects, including males’ experiences of body image being neglected in clinical and research settings, with some arguing it is a ‘hidden issue’ (Hargreaves & Tiggemann, 2006; Jankowski et al., 2018; Whitaker et al., 2021).

Qualitative research highlights the manifestation and expression of male body image and body image distress are nuanced and can be contextually dependent on factors such as age, culture, and sexual orientation. There is a dearth of qualitative research on body image among males in Aotearoa. Aotearoa has its own specific and diverse cultural context (Munford & Walsh-Tapiata, 2006; Statistics New Zealand, 2019), ultimately limiting the usefulness of literature from outside of Aotearoa.

Current Study

The current study is a qualitative exploratory study which addresses this lack of data on male body image and body dissatisfaction in Aotearoa. Quantitative data in Aotearoa is limited to two studies. First, Miller & Halberstadt (2005) found that young women, but not men, experienced body dissatisfaction. More recently, Stronge et al. (2015) found men had comparable rates of body dissatisfaction to women. With respect to qualitative data, we could not find any existing studies in Aotearoa. In the current study, we conducted qualitative interviews with males attending one of two universities in Aotearoa. Individual interviews were selected over focus groups as previous literature indicates individual interviews may provide a supportive environment that facilitates disclosure when discussing sensitive topics such as body image (Kaplowitz, 2000; Kruger et al., 2019). We were also concerned that using focus groups would result in social comparison, which could result in some males not wanting to share their thoughts (Hollander, 2004). Grogan and Richards (2002) found that, in a group context, males might engage in ‘machoism discourse’ and avoid being positioned as ‘feminine’ for showing concern about how their body looks. Thus, we believed richer accounts would be provided in an individual interview. Furthermore, we decided to have a female interviewer as previous research indicates that men are more likely to disclose in an interview facilitated by a female as this is perceived as ‘less threatening’ (Grogan & Richards, 2002). Our primary aim was to investigate how young males in Aotearoa conceptualise body image and the factors influencing body dissatisfaction.

METHOD

Participants

Fifteen males aged between 20 and 31 (Mean = 21.3 years) participated in the current study. Most participants identified as New Zealand European (n = 10), with one identifying as Māori, one as Dutch and Māori, one as Samoan, one as Black Jamaican, and one as Indian. Sexuality data was available from 10 of the participants, and all ten identified as straight and attracted to the

opposite sex. Participants were enrolled in a range of undergraduate and postgraduate degrees. Ethics approval for the study was gained from the local university ethics committee (reference H21/100).

Recruitment

Convenience sampling was used to select participants. A poster about the study was put on social media and hung up at the university gym. This recruitment method was used because it was believed that this is where we would get the attention of those who may have strong thoughts about body image and be willing to share and provide a detailed description of body image experiences. The inclusion criteria were that participants had to identify as male and be current university students.

Males who expressed interest contacted the primary researcher and were sent an information sheet and consent form and invited to an individual interview. The information sheet highlighted the aim of the present study, what would be involved in participating, and details on data collection and storage. Once consent was provided, an interview time was scheduled and finalised. Participants had the option of taking part in the interview in person or online; two participants chose to do the interview online and with their cameras on, and the rest chose to interview in person.

The information power model (Malterud et al., 2016) was used to inform the number of participants needed for the study. This aligned with the research design because, as an exploratory study, we did not aim for a complete description of the phenomenon but rather valuable and substantial contributions to the current understanding (Braun & Clarke, 2021). In the planning stages of data collection, it was thought that approximately 10-15 participants would be required to reach sufficient information power. This was continuously evaluated throughout the research process. Given that the questions were relatively broad, as well as our use of cross-case analysis, and the convenience sampling recruitment strategy (providing sparser specificity), this indicated that a sample at the higher end of our initial estimates would likely be needed to achieve adequate information power. Depth of dialogue is another consideration for information power. The articulateness of the sample was hard to predict and was therefore assessed throughout data collection. The interviewer (AM) and her supervisors have previous experience with the body image literature (Graham, Newell, Phillips, Pritchard, et al., 2023; Graham, Newell, Phillips, Treharne, et al., 2023; Poulter & Treharne, 2021) and the research is supported by theoretical background, but AM is an early career researcher with preliminary experience conducting qualitative interviews and so we considered whether a larger sample was needed to achieve good depth of dialogue. As the interviewing progressed, AM became increasingly comfortable with eliciting stronger depth of dialogue. However, some participants were not as articulate as others, prompting AM to continue collecting data after 10 interviews. As more participants were recruited, some provided elaborate discourses of high relevance, increasing the sample’s specificity. Therefore, when 15 interviews had been conducted, it was deemed that the data had sufficient information power.

Individual interview procedure

An interview schedule was created by adapting the questions from studies conducted in Australia (O’Gorman et al., 2020) and Aotearoa (Poulter & Treharne, 2021). The resulting semi-structured interview schedule was reviewed by an experienced qualitative researcher (GT). The individual interviews comprised one activity-oriented and 13 pre-planned open-ended questions (see supplementary materials). The activity strategy involved the presentation of media images found by the primary researcher by searching ‘muscular ideal selfie’ online. These images were of young, lean, and muscular men taking mirror selfies in a relatively neutral setting (see supplementary materials). These images were used to prompt discussion about messages that social media portrays about male body image. The interviews were conducted in an interview room, with the interviewee and interviewer present. The interview room had a couch, which provided a relaxed setting.

Participants were told that if they did not feel comfortable answering a question, they did not have to, and that there was no right or wrong answer. At the end of the interview, demographic data was collected from the participants. Although every effort was made for the conversation to progress organically, prompts were provided when AM deemed it necessary to request additional information. Participants were given a \$50 supermarket voucher for their contribution. The duration of data collection ran from the end of November 2022 through to the end of February 2023. The individual interviews lasted between 17 minutes (min.) - 67 minutes (max.), averaging 42 minutes per interview. The length of the interviews reflects the varied depth of engagement, as some participants were more reserved in answering questions even when prompted; meanwhile, other participants engaged in in-depth elaborations about their perspectives and experiences. The interviews were audio-recorded and then transcribed verbatim with the transcribing software Otter.ai. Transcripts were then checked over for accuracy before analysis.

Analytic approach

Reflexive thematic analysis of individual interview transcripts was used per the six-step process outlined by (Braun & Clarke, 2022). Reflexive thematic analysis is used to identify patterns across a data set (Braun & Clarke, 2022) which aligns with the research design goal of deepening understandings of male body image specific to Aotearoa. Braun and Clarke (2022) state that the epistemological approach one takes towards qualitative research is on a continuum; therefore, approaches are flexible and not mutually exclusive. In line with this continuum, the research took an approach that was more so inductive and semantic when analysing data (Braun and Clarke, 2022). This was deemed most appropriate to provide a rich description of young male’s experiences of body image, as this topic has had little exploration in the context of Aotearoa, and we did not want to miss out on capturing any specific nuances within this population.

A critical realist epistemology was applied in the reflection and interpretation of the data about how young men understand their experiences relating to body image. An approach that leans more towards critical realism was decided as appropriate because it allows for the young men’s narrative of body image to be taken to reflect their expressed experience of the topic as their lived reality.

However, it also considers that cultural context and social structures have a significant impact on the understanding and experience of body image. Therefore, this may have an influence on the young men’s accounts of their experience (Houston, 2001).

As per the guidelines of Braun and Clarke (2022) the analytic process began with AM repeatedly listening to the audio recordings to establish familiarity with the material. Transcripts were then read once again while generating ideas for coding. The initial codes evolved from the analysis of all the entire transcripts and were entered into a table with supporting quotes for each individual interview. As quotes were added from each interview, codes were amended, merged, refined, and compiled into a comprehensive table incorporating data from all 15 interviews. The codes were used to iteratively develop themes and subthemes, which were then rechecked against the data to ensure their independence and relevance to the research questions. Coding was done within Microsoft Word and the thematic map of themes was developed using a combination of pen and paper, and Microsoft Powerpoint.

Throughout the entire research process, reflexivity was engaged to acknowledge the lens the research team takes to the data and reflect on how this influences the research and its interpretations. AM kept a journal in which she noted down her reflections, she also took field notes throughout data collection and data analysis. She acknowledged her position in the research as European, young, and female. Further, she acknowledged her experience as a trainee clinical psychologist and the primarily deficit-focused approach in this field. She also noted that she had done prior reading of male body image literature and considered how this may make some aspects of the young male’s accounts appear more salient, and therefore create a deductive influence on the data. This was her first time analysing qualitative data and thus data analysis was over-seen by two research supervisors (CR & DS) and advice was sought from researchers with extensive knowledge of qualitative research (GT) and cultural issues (JQ & EF) to ensure the rigor of process and the final themes. Feedback was provided on the themes and codes and there were only two instances where it was suggested a code may have a better fit in another theme.

ANALYSIS AND COMMENTARY

Five themes were developed from the thematic analysis and are described in detail below. The themes identified are (1) *masculinity and muscles lead to success*, (2) *negative body talk from others hurts us*, (3) *a lack of awareness of body image concerns*, (4) *men deal with body image issues on their own*, (5) *the negative impact of westernisation on body image*. Pseudonyms have been used to protect the participants identity.

Theme 1: Masculinity and muscles lead to success

There was consensus among the young men about what they perceived as the dominant idealised body image. Their discussion focused on what is ‘*aesthetically pleasing*’, whereby most participants described this as someone who is tall, lean, and muscular. Some participants also noted that defined ‘*facial structure*’ was

part of this ideal. The young men associated these physical features with 'strength' and 'power' throughout their narrative. In turn, these traits and features then became tied to their ideas of masculinity.

'To be an alpha male, to be a real man, you got to be muscly, you got to be strong. You got to be you know, chiselled, abs, all that stuff'. Nikau.

Participants then discussed that embodiment of what it is to be a man is believed to lead to a higher likelihood of being 'successful' and 'desirable'. These thoughts were described as occurring 'subconsciously' or being 'implicit'. The young men went on to express how such beliefs manifest as positive discrimination towards men who are more attractive, noting that this may be particularly salient in the context of pursuing sexual partners and romantic relationships. In turn, they described how these beliefs create a drive to achieve what is represented as a more attractive body.

'So I feel like people tend to be a lot more lenient and nice to people that just look nice'. George

'And I think those who have a conventionally attractive face have a much easier time in life than those who don't'. Henry.

One young man provided an account of how these ideas around masculinity, muscle, and success are particularly problematic within LGBTQIA+ communities:

'Body shaming is a massive problem among LGBT communities, particularly for males, it's just the idea in the LGBT world... the ripper your body, the better'. Delroy.

Theme 2: Negative body talk from others hurts us

Most participants discussed the experience of negative body talk from friends and family. The negative body talk involved comments about weight and muscle size and shape, which mirrored the idealised body their discussion represented. The young men's thoughts reflected that the further away one was from this ideal, the more likely they were to be the receiver of harsh comments about their body. They described that social media plays a significant role in influencing and perpetuating negative body talk with ideas that men should be 'fit and lean', and that it is easy to get into 'good shape'. At the same time, the young men discussed that it is 'unrealistic' to achieve the standards that underpin negative body talk. Therefore, such insight may act as a protective factor from the internalisation of idealised bodies. However, at the same time, they highlighted that for some, these comments have a negative impact at a social and emotional level.

'A lot of time I was really ashamed to be shirtless or you know show my body like that. And yeah, I guess, not only that but like talking to people, I was afraid of them judging me...' Sione.

One participant discussed how the discrepancy between someone's current body image and the comments made about one's body can result in body change behaviours.

'And then sometimes they made [referring bullies] the person more quiet. Probably less sociable. But then sometimes... it made the person lose a lot of weight and get like really fit'. Wiremu.

Further, the participants discussion reflected a spectrum as to how overt or covert negative body talk manifested. The young men's narrative alluded a sense of normalisation of negative body talk, being something that 'every guy gets'. Their thoughts reflected that negative body talk is particularly salient in the context of friendship groups and high school where it seen as 'playful bullying'. There was consensus from the participants that this may be due to a pervasive sense of social comparison. Although the young men acknowledged the joking nature of these comments, they also perceived them as 'insensitive' and potentially damaging in the long term.

'And we just have friends in our wider friend group whose nicknames revolve around the fact that they were big at one time in their life. And that's like quite a normal thing in guy groups'. Leo.

With respect to parents, negative body talk was sometimes direct, including 'calling their kids fat'. One participant who identified as Samoan described that negative body talk from his parents is more discreet.

'My parents don't really say it straight to me, but I have always heard them talk about how big I've gotten'. Sione.

Theme 3: A lack of awareness of body image concerns

The young men described the way in which male body image issues are perceived at the individual and societal level, which seemed to reflect a lack of awareness at the individual level and a sense of ignorance at the societal level. Most of the young men discussed body image issues as physical issues as opposed to an issue around one's perception. While a few participants noted that body image is inherently tied to mental health, many of the young men saw body image as separate from mental health:

[when discussing the experience of body dissatisfaction] 'I think in the mind of most guys is well start working on your physical self today and then you will be ok'. Whereas I think that if it was something like, bipolar disorder... there'd be more understanding being, 'oh well, actually you can't help this'.' Leo.

The young men's narrative reflected that if body image is conceptualised as a physical issue, this means that societal responsibility can be minimised, and responsibility can be placed largely on the individual:

'So I don't think society really cares I think, if a guy doesn't have the body he wants, I just think society kind of looks to them like that is their own fault, it's their problem'. Liam.

'There's like a huge trend on TikTok at the moment... And it's like if you are unhappy then just go to the gym... stop whining about it. Just start making change for yourself'. George.

Further, a majority of the young men brought up their perception of the gendered nature of body image concerns, whereby they described body image issues as a much bigger concern in society for women than for men:

'I think it's just because right now, it's a bigger thing, trying to fix the much larger, more systemic issues with like woman's body image and

expectations... that male ones aren't as big a priority right now sort of thing'. Chris.

'Body image is... very much a woman's issue. I think... you know, of course it is'. Chris.

Some young men expressed concerns how this gender bias may translate into stigma, particularly around the experience of male eating disorders, and therefore the possibility of under-detection:

'The stigma of guys, like, you know, a guy can't have anorexia or something like that'. Jai.

'When you see a skinny dude right, you think, oh... he's probably this geeky dude that has never played sports in his life... maybe he has like a hobby on the side... like board games or you know video games, or he's a musician or something... But you don't necessarily think straight away that he might have anorexia. Whereas maybe if it was a girl... real skinny... its like 'oh she's got anorexia'. Nikau.

Together, through this lack of individual and societal awareness, the young men's narrative reflected the minimisation of male body image concerns and thus leading to a belief that it is not important enough to address.

'But it's not really in society, guys, right now, as like even a talking point... I don't think until it becomes considered like important to discuss will it even be on the table'. Chris.

'And I'd say that on the list of things that if I were to be dealing with, in my head, that [body image issues] probably would be one I'd probably think wasn't as important'. Leo.

'So like you know... it's not really worth talking about, like in their minds, or in society'. Ollie.

Theme 4: Men deal with body image issues on their own

There was consensus among the young men that it is common for men to experience body dissatisfaction. Their narrative indicated that they perceived the severity of the body dissatisfaction on a spectrum which may in part reflect the lack of awareness and ignorance, but may also highlight the presence of underlying protective factors. Most participants acknowledged body dissatisfaction as normative discontent:

'[I] think everybody at some point is unhappy with their body'. Liam.

'And a lot of the time [young men] probably want themselves to be more muscular or toned or taller. More square features, or you know, I think that's a pretty natural thing for a lot of young people to think'. Matt.

However, one participant described males body dissatisfaction as: 'a pretty big issue' [Henry].

There was consensus among the participants that even if male body dissatisfaction was a *big issue*, it is not something 'guys really talk about'. This idea maps onto the barriers to help-seeking the young men discussed, whereby seeking help was associated with a deep sense of shame and weakness. Their narrative reflected that seeking out help would go against their concept of the

masculine successful ideal. In turn their thoughts highlighted that this underpinned the wider belief that men should deal with problems on their own.

[when discussing the experience of body dissatisfaction] 'Men are kind of like, supposed to be perceived as being like this unemotional, like happy with their bodies kind of thing'. Aaron.

'I guess... it'll make them think that they're just looking weak, I guess. Because it's that typical 'oh guys don't ask for help'. So I think it's just that mentality of just soldier on and try figure it out by yourself'. Aaron

The young men's discussion around the stigma of help-seeking revealed a lack of help resources for male's experiencing poor body image. Many participants were stumped with the question as to how one may get help. Therefore, even if one decided to seek help, they 'wouldn't know how to'. In combination, the high level of stigma associated with men's help-seeking and lack of help resources indicated that avoidance strategies may be a way that male's deal with the emotional distress caused by the experience of body dissatisfaction. This highlighted a paradox between the young men seeing body image concerns as separate from mental health.

'Well I think it's interesting about how you might treat someone or help someone who has bad body image, purely because I just have no, like, ideas really off the top of my head on how you might do that'. Matt.

'So I don't know how I would do that. Fuck. Yeah. Damn. That's a really hard one'. Henry.

Stimulation-seeking to cope with body dissatisfaction was one form of avoidance that was highlighted by several participants:

'Do drugs and shit, can be a big thing, so you don't have to think about your issues'. Henry.

Emotional suppression was described as a useful strategy by another participant:

'Personally, I like stoicism quite a lot and that's what I use, like I don't really [pause]... external thoughts [pause]... I can choose how I interpret them. But I don't know how other people would block them out'. Aaron.

Theme 5: The negative impact of Westernization on body image

The young men's narratives represented the importance of considering the nuanced experience of body image within minoritised cultures. While all participants expressed similarities in the experience of body image across cultures regarding perceptions of strength and masculinity, a small number of young men highlighted the impact of Western influence on their culture's experience of body image. All of these participants discussed the importance of considering culture with a passion.

One participant who identified as Samoan indicated a shift in Samoan culture from not worrying about how one looks to now a pervasive drive to achieve Western ideals. He discussed this in a tone that indicated it's negative impact:

'I guess before Christianity, and before any western influence on the Polynesian Islands, and specifically Samoa, people were so open about themselves and the way they look. There was no talk about being a certain size, or, you know, having muscle and all that stuff. But I guess with the Western influence, a lot of that stuff has been driven into Polynesian people [speaking from a Samoan point of view]'. Sione.

At the same time, he discussed that Pacific cultures [particularly commenting on Tongan culture from what he had learnt from his Tongan peers] hold their own ideals about body image and these ideals seemed to be heavily influenced by their families:

'I've known a lot of my peers who come from a family who, who are strict on the way they look. Mostly around the Tongan culture, Tongan culture is real strict on how you look in terms of body size, even with girls'. Sione.

Another participant who identified as Jamaican also described the personal experience that he had when he moved from Jamaica to New Zealand. He described his mindset around body image changing based around the customs of food and exercise. He expressed this as having a positive influence on physical health, however he later described an immense sense of pressure to fit into New Zealand culture.

'And the difference I noticed in New Zealand, is that there's a great focus on fitness and health. And there, you know, a lot of people... go out in the great outdoors and exercise and people stay active. In Jamaica we're more sedentary, I think, and obesity is a huge problem in the Caribbean. Just because of the way that we eat, it's a lot of fatty foods. And so, you don't really care much about how you look, really'. Delroy.

The young men who identified as Māori and Samoan discussed the important role of food within their culture and how Westernization has made them *'turn away from their own cultural food'*. Nikau.

'But we love food, so much, both Māori and Pasifika'. Nikau

This then led to a discussion around social inequality that Māori and Pacific people experience which suggested the role this plays in their experience of poor body image.

'You look at the disparity between Māori, Pacific and others in New Zealand, we're making less money. I'm not saying there's a pay gap, a Māori person, and a white person, European, French, whatever, in the same job, they'll get paid the same. But it's the influence of how important is education in Māori/Pacific Islander homes. You have less money, you buy crap food, you get fat, have poor body image, it's huge, you know, there are so many factors'. Nikau.

DISCUSSION

This research contributes to the understanding of body image in young males in Aotearoa. Five themes were identified, which highlighted the influence of traditional masculine norms on the perception of the 'ideal male body' and what it means to be successful. Further, it was identified that the pressure from peers, family, and society

to achieve this 'ideal' may be harmful. However, perpetuation of masculinity norms may lead society to ignore the harm the 'ideal' body image brings to males and thus creating a perception that males should deal with body image issues on their own. The negative impact of Westernisation on body image was also alluded to, particularly by those males who identified as part of a minoritised culture. Our findings are aligned with previous findings in the field of male body image research as well as contributing to novel understandings of male body image specific to Aotearoa New Zealand. The potential implications and applications of our findings in relation to wider trends in male body research are discussed below.

The first four themes reflect how toxic masculinity manifests in conceptualisations and experiences of male body image. In turn, toxic masculinity appears to propagate a lack of understanding of male body image within society. The participants' conceptualisations of the idealised body image are consistent with the previous literature, whereby health, muscles, and fitness are identified as long-standing measures of traditional masculinity within Western society (Bordo, 1999; Grogan & Richards, 2002; Pope et al., 2000). Furthermore, as the importance of the traditional male role as the provider has declined over the past two decades in Western societies, masculinity is put under threat and thus it is suggested that a young man's body is one of the few remaining sources of masculine body esteem within Western cultures (Jude, 2023; Knight & Brinton, 2017; Yang et al., 2005). The young men in this study noted that these beliefs about what it is to successfully be a man result in a drive to achieve this idealised body image. Indeed, numerous studies have found that higher traditional gender role conformity and gender role conflict in males is associated with higher rates of body dissatisfaction and drive for muscularity (Blashill, 2011; Griffiths et al., 2015; Murray & Lewis, 2014; Shepherd & Rickard, 2012).

Similarly, the masculine ideal becomes a reference point for negative body commentary (Tylka, 2011). The young men in this study discussed the spectrum of negative body comments made by peers and family relating to levels and fat and muscularity. Their narrative reflected that this negative body commentary was a common occurrence and perceived as banter or in a joking manner. This suggests negative body commentary may not be perceived as problematic and therefore allowing it to become socially normative. Furthermore, the traditional gender role conceptualisation that men are emotionally tough (Mahalik et al., 2003) may act to minimise the perceived effects of these comments on male wellbeing. On the contrary, evidence suggests negative body commentary leads to internalisation of the ideal body, body dissatisfaction and body change behaviours amongst young males (Grogan & Richards, 2002; L. A. Ricciardelli et al., 2000; Schuster et al., 2013; Tylka, 2011). Despite evidence of these negative outcomes, the young men in this study indicated that young males may have a lack awareness and minimal understanding of what body image is and how body image issues may impact males.

Our findings suggest that young males tend to understand body image as one's physical looks rather than a psychological representation. This specific

understanding was showcased when the young men in this study were asked about how one may go about dealing with body image issues. A relatively large number of the participants responded with practical suggestions that will physically change one's body, and therefore implying that men can deal with body image issues on their own. This narrative is likely to be reinforced by traditional masculine norms and the wider idea that men do not need to seek help for their problems (Lynch et al., 2018; Yousaf et al., 2015). Together, such beliefs become a major barrier to males accessing mental health help at both an individual and societal level (Chatmon, 2020).

One way of breaking down such barriers is providing gender specific help resources, and therefore emphasising the importance of developing male-specific prevention and intervention for body image issues (Parent, 2013; Weltzin et al., 2005). Based on the narratives in this study, males would benefit from a psychoeducation approach, which is an effective component of disordered eating and body image issue prevention and intervention (Cash & Hrabosky, 2003; Cash & Lavallee, 1997; Waller et al., 2019). Our findings suggest a male-specific psychoeducation approach should focus on two aspects. Firstly, helping young males understand that body image goes beyond an individual's physical looks and, secondly it should educate young males about the harmful impacts of negative body commentary.

These first four themes are likely to be most pertinent to cisgender heterosexual males who are White, and there are likely to be differences for minoritised sexual and cultural male populations. Several large-scale studies from the US have indicated that there are differences in the experience of body image and body dissatisfaction between males who identify as heterosexual or identify with a minoritised sexual identity, as well as between white and non-white males. For example, gay men, relative to heterosexual men are more likely to report greater body dissatisfaction, investment in appearance, interest in body modification strategies, appearance related pressures and social comparison and the impact of body image on their sex lives (Frederick & Essayli, 2016). Similarly, it has been found that White males report higher levels of body satisfaction than Asian and Hispanic males. This pattern was relevant even when controlling for BMI, however when BMI was controlled for it was not significant between White males and Hispanic males (Frederick et al., 2007). Furthermore, (Gonzales & Blashill, 2021) examined probable eating disorders, eating disorder symptoms, probable body dysmorphic disorder, body dysmorphic disorder symptoms, drive for muscularity and, appearance and performance enhancement drug misuse in a sample of ethnically/racially diverse cisgender sexually minoritised individuals. Their data highlighted that individuals with minoritised sexual identities are a vulnerable group at risk of developing body image concerns and further indicated that Hispanic sexually minoritised individuals reported the highest rates of eating disorder and body image concerns (Gonzales & Blashill, 2021).

Together this research highlights an important clinical and research implication regarding the need to consider cultural and sexual orientation differences and their intersectionality as important and relevant predictors of body image concerns among men. The current study, as

reflected in Theme 5, extends the research to include qualitative differences in the experience of body image for males who identify as Māori or Pacific. Māori are the tangata whenua (indigenous people of the land) of Aotearoa/New Zealand, and Māori identity is defined through whakapapa (genealogical descent and connection), a core principle of Te Ao Māori (Kukutai, 2004). Pacific identity is defined as a broad term representing a pan-Pacific label that encompasses those who are from the Pacific nations which are linguistically, culturally and geographically diverse and distinct from each other (Health Research Council of New Zealand, 2014). The world views of Māori and Pacific peoples differs from that of the Western world and thus is likely to have an influence on the perception of body image (Durie, 1998; Te'evale, 2011).

The narratives in the present study suggest that the experience of body image in minoritised cultures within New Zealand likely reflects a combination of culturally traditional and western viewpoints. Previous research with Pacific peoples indicates that a large body-shape and image is accepted and desired in Pacific cultures (Te'evale, 2011). Furthermore, within Tongan and Fijian cultures, the masculine domain is a central aspect of everyday life (Ravuvu, 1983) and it has been found that Tongan and Fijian adolescent boys desired high levels of muscularity, a stronger body size and a larger body size (Ricciardelli et al., 2008). Furthermore, in traditional Māori culture, slender body forms are not seen as the 'highly desirable ideal' and obesity is not as disproved of as it is in Western Culture (Durie, 1998). To our knowledge there is no research on body image with Māori males, but a study with Māori university females indicated that they preferred a smaller personal 'ideal' body than the ideal that they identified for their ethnic group (Talwar et al., 2012). Thus, there appear to be nuances between cultural groups and their experience of body image even if they are living in the same country. This is consistent with previous research from the US, and thus echoing the need for further research is to understand how sociocultural factors influence ethnic differences and similarities in predictors of body satisfaction (Frederick et al., 2007). Currently there is some quantitative data on male body image using standard assessment scales (Blashill, 2011; Cafri & Thompson, 2004; McCabe & Ricciardelli, 2004). However, these scales have been developed predominantly within the context of white male cis-gender populations. This gives rise to the question of whether assessment and subsequent treatment approaches suit the specific and/or salient needs of diverse populations in Aotearoa/New Zealand.

Furthermore, there are likely to be differences within cultures, for example Samoa and Tonga are only 2 countries from the 14 Pacific Island nations and therefore it will be imperative to examine within-group cultural differences. Indeed, previous research suggests ethnicity-specific assessment and intervention is fundamental to maximising therapeutic benefit. For example, the need for Pacific-specific mental health care (Kapeli et al., 2020) is echoed by a qualitative study on barriers Pacific peoples experience when accessing mental health care, an identified barrier was a lack of understanding of collectivist cultural values and practices (Fa'alogo-Lilo & Cartwright, 2021). Similarly, the need for Māori specific

eating disorder services (Lacey et al., 2020) is emphasised in qualitative work with Māori individuals exploring their experiences of barriers and enablers when accessing specialist eating disorder services (Clark et al., 2023). Together, these cultural differences highlight the need to comprehensively understand ethnic differences in the experience of body image before working on assessment and intervention. Thus, going forward this creates avenues for future qualitative work within diverse populations of Aotearoa New Zealand.

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Appendix A.

Semi- Structured Interview Questions

1. When you hear male body image what kinds of things come to mind?
 - What do you think about your body image?
2. Where does your idea of the ideal male body come from?
 - Which influence do you pay the most attention to?
 - Friends and family influence
 - Growing up influence
 - Salient contexts
3. Where do others ideas of the ideal male body come from? Which influences do they pay most attention to?
 - Which influence do you pay the most attention to?
 - Friends and family influence
 - Growing up influence
 - Salient contexts
4. What kinds of ideas do you think the media promotes about male body image?
 - For example, can you think of a time when you were looking at a magazine or watching a TV show and it made you think about your body?
 - Media task (discussing media images) (what kinds of ideas do these media images portray about men's bodies?).



5. Does the way you feel about your body on a given day change how you think about food and eating?
 - Do you find what you eat changes based on how you are feeling about your body at the time?
 - Bring it back to the media images. (E.g., How do you think somebody who sees this image might think about food/body/exercise?)
6. What do you think distinguishes a healthy diet from an excessive one?
 - Ask about thoughts on protein supplements.
7. What do you think distinguishes a healthy exercise routine from an excessive one?
 - Ask about what the function of exercise should be.
8. Can you tell me a little bit about some opinions that come to mind when you – just you, and not other people – think about guys who are unhappy with how their bodies look?
 - Do you think it's common for guys to be unhappy with their bodies?
9. What about other people, but not you personally – what do you think are some opinions other people have about guys who are unhappy with how their bodies look?
10. Imagine for a moment that you were struggling with poor body image. Would you ask for help?
 - Why/why not?
11. Imagine for a moment that you were struggling with poor body image. Would you ask for help? Why/why not?
 - What do you think would help? What kinds of resources do you think would be useful?
 - Do you know of anything that men do to help with poor body image?
 - If there was to be a resource to help improve body image what do you think would be the best way to deliver it? (provide examples like online, in person etc.)
12. Is there anything else that we haven't discussed that you would like to bring up?
13. What do you think is the most important thing that we have discussed today?