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Different men – similar meanings. Rural Norwegian men’s constructions of meanings related to health, body and physical activity

Stein Egil Kolderup Hervik^{a,b} and Eivind Å. Skille^b

^aFaculty of Humanities, Sports and Educational Science, University of South-Eastern Norway, Vestfold, Norway;

^bFaculty of Social and Health Sciences, Inland Norway University of Applied Sciences, Elverum, Norway

ABSTRACT

This paper aims to provide an understanding of why a group of middle-aged and elderly rural Norwegian men with heterogeneous backgrounds largely express homogeneous meanings related to health, body and physical activity. Data was generated through 18 in-depth interviews with men of different age, varying ethnicity and with different levels of education. With Bourdieu’s theory of practice and Connell’s theory of hegemonic masculinity as theoretical framework, the discussion focuses on how the construction and expression of these understandings is formed by the context in which the men live their lives and by dominating masculine ideals. We argue that the men’s meanings related to health, body and physical activity are practices through which they accumulate and display several forms of capital – also masculine capital. Not only does the volume of masculine capital a man holds, position him in the social space, it also positions him in the local masculine hierarchy.

KEYWORDS

Masculinity; health; body; physical activity; Bourdieu

Introduction

This paper builds on the findings from a larger study in which middle-aged and elderly lay men’s meanings related to a) health, b) body, and c) physical activity have been researched. The participating men’s meanings related to these three interrelated phenomena have been discussed separately elsewhere. Regarding health, the sample expressed complex but shared notions of the individual’s versus the state’s responsibility. Their own responsibility was to act in certain ways to keep healthy, while the state’s responsibility was facilitating the healthy lifestyle choices and providing the needed health care for the population (Hervik and Thurston 2016). Regarding body, the men talked about functionality in their everyday life and for sport and physical activity, physical and mental health, as well as appearance – both how others perceive their bodies and for self-perception of their body (Hervik and Fasting 2016). When it comes to physical activity, the main finding is that the men preferred to be

CONTACT Stein Egil Kolderup Hervik  stein.e.hervik@usn.no

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outdoors when undertaking physical activity (Hervik and Skille 2016), a point we return to in the context and findings/discussion sections of this paper.

When writing up the concluding report of the study, a new theme emerged through the juxtaposition of health, body and physical activity. The new theme – which occurs to be an overarching – finding of the study, is that/how the sample of heterogeneous group of rural Norwegian middle-aged and elderly men expressed strikingly homogenous meanings related to these phenomena. The aim of this article is thus to understand why a heterogeneous group of men largely express homogeneous meanings related to three interrelated phenomena: health, body and physical activity. This includes the application of theories already used in aforementioned publications, Bourdieu and Connell. Moreover, hence developing from these theories, the present analysis is exploring how the construction and expression of these meanings is formed by the context in which the men live and by dominating masculine ideals.

Literature review

Studies from a number of different countries have explored how people relate to and account for their health, body and physical activity. Studies of how lay people understand and relate to health have been carried out in different contexts during the last four decades, e.g. France (Herzlich 1973); Scotland (Williams 1983); England (Blaxter 1990, 1997; Robertson 2006); and Norway (Fugelli and Ingstad 2009; Hervik 2016).

Considering the gender dimension in lay perceptions, Robertson (2006) explored the relationship between masculinity and health. The men in his study expressed importance about being in control and acting responsibly in relation to health, while simultaneously expressing that they did not think much about their health. Hence, Robertson argues that men have to manage “two conflicting discourses: First, that ‘real men’ do not care about health and second, that the pursuit of health is a moral requirement for good citizenship” (178). According to Robertson men have to balance their rhetoric and practices between these two positions in relation to health, in order to maintain an “appropriate” masculinity.

With reference to Saltonstall (1993), Robertson (2006) argues that both doing and simultaneously giving the appearance of not doing health, become ways of doing gender for men. In studies from the Netherlands (Verdonk, Seesing, and de Rijk 2010) and Australia (O’Kane, Craig, and Sutherland 2008), it was found that men did not care about their health until something was seriously wrong. These examples might be understood as one way of balancing the discursive dichotomization of ‘don’t care/should care’ in male health.

Regarding men’s relation to the body, theory and research suggest that ‘real men’ are supposed to be unconcerned with their appearance, and rather desire a well-functioning body in sports, work and everyday life (Jackson and Lyons 2012). Studies from Finland and the USA show that body functioning is what matters for men, and that men relate such functionality to health. Other views on the body such as attractiveness struck the men as feminine and should therefore be avoided (Calasanti et al. 2013). Nash (2018) found that cross fit coaches in a hyper-masculine setting focused on the performance of the body, rather than body weight and body appearance. In a study of adult English men, participants focused mainly on the functionality of the body, but a minority of the men also focused on the appearance of the body (Halliwell and Dittmar 2003). Moreover, there seems to be a

change going on, as some recent studies found that men are increasingly preoccupied with their body's appearance (Drummond 2002; Hervik and Fasting 2016; Frost 2003; Ricciardelli and White 2011; Tager, Good, and Morrison 2004).

Meanings and values attached to physical activity by individuals vary across both characteristics of activities undertaken and of the participant (Steen-Johnsen and Neumann 2009). However, one main pattern is that lay people's talk about and relationship to physical activity is gendered (Hauge 2009; Hauge and Haavind 2011; Monaghan 2008; Tudor-Locke et al. 2003; Wright, O'Flynn, and Macdonald 2006). Monaghan (2008) found that English men expressed complex and gendered notions of physical activity as a health-related practice and as a practice to regulate body size. In the Netherlands, Verdonk, Seesing, and de Rijk (2010) found that adult men used sports and exercise to display and achieve masculinity. In a study of middle-aged and elderly men in rural Norway, it was revealed that physical activity was considered both a means and an end. Considering the 'means', physical activity was seen as a way to achieve improved physical and mental health, and to experience social interaction. Regarding 'ends', physical activity, exercise and sports were considered to be gratifying and to create wellbeing (Hervik and Skille 2016).

Rural contexts are often characterized by patriarchal gender roles, and as dominated by stereotypical masculinities (Brandth 2002; Bryant and Pini 2009; Bye 2009; Campbell and Bell 2009; Little 2002; Shortall 2002). In the literature on rural masculinities, men's involvement in numerous gendered physical practices has been discussed. It has been argued that men create, act and express their gendered and masculine identities through involvement in physical labour (such as logging and farming (Brandth 2002, 2006; Brandth and Haugen 2005; Bye 2009), hunting (Bye 2003, 2009; Brandth 2002), fishing (Brandth 2002; Bull 2009; Gerrard 2013) and local leisure activities (Bye 2009; Kenway and Hickey-Moody 2009; Trelle, van Hoven, and Huigen 2014). According to Bye (2003), outdoor activities, especially fishing and hunting, have been considered as important practices in constructing rural hegemonic masculinities due to their association with toughness, wildness and male camaraderie. Aure and Munkejord (2016) found that being outdoors is an important part of being a rural man in Norway (see also Hervik and Skille 2016). Recent research on masculinities in Norway, however, reveal alternative constructions of rural masculinities (Bye 2009). These are masculinities constructed around homemaking, egalitarian fathering and contributing to the community (Brandth and Overrein 2013; Bye 2009).

The context

Social phenomena such as health, body and physical activity require to be analysed in the context in which they emerge (Blaxter 2010; Ettorre 2010; Robertson 2007). Hence, sensitivity to the particularity of both the Norwegian national context and the local context of Hedmark is important in order to understand the findings of the study.

Norway is a social-democratic welfare state (Copeland et al. 2015; Esping-Andersen 1990; Huber and Stephens 2000; Raphael 2015; Raphael and Bryant 2015), in which universalism, the principle that public services are available to all, is a prominent feature (Dahl, Bergli, and Wel 2014; Esping-Andersen 1990; Johnsen 2006). Norway has a positive health profile in terms of life expectancy and ability to ensure good health for the most vulnerable parts of the population (Bambra 2012). The majority of the Norwegian population have a secure financial situation, with broad access to material and social benefits (Statistics

Norway 2016). Nevertheless, there are social inequalities in Norwegian society on the basis of gender, ethnicity, and class, which imply inequalities in health and health-related behaviour (Dahl, Bergli, and Wel 2014; Statistics Norway 2016).

The local context of this study is Hedmark, one of the 19 Norwegian counties. Hedmark has a somewhat special health profile, geography and demography. The extent of higher education in Hedmark is low compared to the Norwegian average (Folkehelseinstituttet 2014). Compared to the rest of Norway, Hedmark scores lower on several health-related variables; e.g. larger prevalence of obesity, more social inequality, and a higher prevalence of mental disorders and illnesses (Folkehelseinstituttet 2016). Moreover, a large proportion of the population in Hedmark is physically inactive compared to the Norwegian average (Folkehelseinstituttet 2014), despite an infrastructure and density of sport organizations and fitness centers similar to the rest of the country (Seippel and Skille 2019; Virke 2017).

Hedmark is a rural county with a low population density (7 persons per km² compared to 16.5 persons per km² in Norway as a whole). 55% of the Hedmark population live in urban areas, compared to 78% of the total Norwegian population. Hunting and harvesting from nature are important activities. During 2014–15, approximately 16% of the male inhabitants of Hedmark were active hunters compared to 6% nationally (Statistics Norway 2015). There are many natural opportunities for typical rural activities and winter sports. Hence hunting, hiking and skiing are important elements of the local culture. As shown in former research mentioned in the introduction (Hervik and Skille 2016) and elaborated in the findings/discussion section, there is an outdoor physical culture in this region.

Theoretical perspectives

In order to understand how an apparently heterogeneous sample expresses relatively homogeneous meanings related to health, body and physical activity, two theoretical perspectives are employed. First, Bourdieu's theory of practice aims at understanding social practice, and bridging the gap between structure and agency. Social structures (like gender or class) enable and constrain individual actions, including the possibility to make independent life-style choices. Symbolic power relations in a given context constitute the social space. In this study, social space is a representation of the symbolic power relations between people and groups in Hedmark county. Moreover, social space consists of specialized fields which is 'a network of objective relations (of domination or subordination, of complementarity or antagonism, etc.) between positions' (Bourdieu 1989, 231).

Bourdieu employed four basic forms of capital, which the agents in a field are struggling for – economic, social and cultural, and symbolic (Bourdieu 1977, 1990, 2011). One form of capital, given certain factors, can be converted into other forms. Agents are positioned in the social space based on the volume and distribution of appropriate capital. Agents are

distributed in the overall social space (...) according to the overall volume of capital they possess and (.) according to the structure of their capital, that is, the relative weight of the different species of capital, economic and cultural, in the total volume of their assets. (Bourdieu 1989, 17)

In this study, the participating men hold different positions in the social space of Hedmark and struggle for the appropriateness and accumulation of forms of capital. The positions and symbolic power relations in a field depend on the specific rules and values appropriate

to a person's capital and habitus (Bourdieu 1984). The agent's background in relation to gender, class, ethnicity, age, sexuality, (dis-) ability etc., is significant for an agent's volume and composition of capital and the agent's habitus (ibid.). Bourdieu (1977) understands habitus as structured and structuring structures, or systems of durable and transposable dispositions. Habitus is "socialized subjectivity" (Bourdieu and Wacquant 1992, 126). A person's habitus is manifested by the manner in which that person behaves and conducts her- or himself, and in dispositions, attitudes and tastes (Bourdieu 1984). Because habitus is social, it carries

the traces of the lines of division and distinction along which the social is organized. That is, class, race, gender, sexuality, and so on, are all marked within the habitus. Further, and because these social distinctions are hierarchical, not all habitus are worth the same. (Lawler 2004, 112)

Lawler (2004) points out that habitus "makes sense" only in the context of specific local contexts" (112). Here, the participating men's construction and expression of meanings related to body, health and physical activity are formed by their habitus, and thus are cultural and contextual.

It is difficult to identify one particular field comprising lay perspectives of health, body and physical activity. Thus, men's construction and expression of meanings related to health, body and physical activity are carried out in a wide range of fields; hence, within a local context with its dominant masculinity. One form of capital suggested as an encounter between men in any field is a form called masculine capital (Anderson 2005; de Visser and McDonnell 2013). The concept of masculine capital is an advantageous theoretical contribution to the understanding of masculinities and men's practices. Masculine capital enables agents to achieve positions in a specific field and, more generally, in the social space. We understand masculine capital as a specific form of symbolic capital – a form for "credit" – that can compensate for non-masculine or reinforce masculine behavior in different fields. For example, if failing in one typical masculine behavior such as physical risk-taking, one compensate with exaggerate another and drink even more (deVisser and McDonald 2013, 6). This is in accordance with how the other forms of capital influence the positioning of agents.

As mentioned above, the specific capitals are embodied in an agent's habitus (Bourdieu 1984). If the agent has a well-fitted masculine habitus for a given field, the agent achieves a favourable or dominant position. In Bourdieu's words, "the social rank and specific power which agents are assigned in a particular field depend first on the specific capital they can mobilize, whatever their additional wealth in other types of capital" (Bourdieu 1984, 113).

Against this backdrop, in order to analyse aspects of men's life it was considered apt also to apply gender theory. West and Zimmerman (1987) conceptualised gender practices as "doing gender"; that is how the individual man or woman expresses masculinity or femininity. However, expressing gender comprises social practices that are interactional and socially and culturally situated, and is not an individual property (West and Zimmerman 1987). A person can never not do gender; doing gender is unavoidable (Ferrell 2012).

Gender is closely related to power. Kimmel (2004, 105) argues that "it is impossible to explain gender without adequately understanding power – not because power is the consequence of gender differences, but rather because power is what produces those gender

differences in the first place.” Connell (1995, 2005) bases her theory on hegemonic masculinity largely on power.

Connell's theory of hegemonic masculinity offers an approach to understanding the gendered power relations between men. Hegemonic masculinity can be defined as the currently accepted pattern of gender practices that legitimises and guarantees some men's dominance, and women's and other men's oppressed positions (Connell 2005). Connell (2005) elaborates stating that there are competing masculinities (hegemonic, complicit, subordinate, and marginalized) that are hierarchically structured. This hierarchy is defined in terms of race, class, sexuality, age, etc. (Connell 1995, 2005).

Masculinity is a fluid concept constructed differently in different contexts (Coles 2009). Hence, sensitivity to the context is therefore of great significance when hegemonic masculinity is applied in analysis of gendered practices. The theory of hegemonic masculinity can be applied at three levels in order to make sense of masculinities and gendered practices (Connell and Messerschmidt 2005); First, the local level which is “constructed in the arenas of face-to-face interaction of families, organizations, and immediate communities, as typically found in ethnographic and life-history research” (849); Second, the regional level which is “constructed at the level of the culture or the nation-state, as typically found in discursive, political, and demographic research” (ibid); Third, the global level which is “constructed in transnational arenas such as world politics and transnational business and media as studied in the emerging research on masculinities and globalization (ibid.). Hence, it is important to understand that local and regional hegemonic masculinities (and hence the hierarchy of masculinities) are constructed in geographical and cultural contexts.

Thus, specific local versions of hegemonic masculinities vary according to local context, and as such differ somewhat from each other. Aure and Munkejord (2016, 14), for example, argue: “The rural place is an important component in the construction of local masculinities and gender relations.” The local hegemonic masculine practices are materialized in cultural frameworks provided by a regional hegemonic masculinity (Connell and Messerschmidt 2005). Consequently, the regional hegemonic masculinity in Norway creates a cultural framework in which masculinities in the local context are materialized through daily practices and interactions. Both the local context (here: the rural place – Hedmark) and the regional context (here: the social-democratic welfare state Norway) are significant in the social construction and reconstruction of masculinities, regarding how men talk about health, body and physical activity.

Method

Sample

Eighteen individual interviews were conducted with men aged 40–90 years, all living in, or close to a small rural town in Hedmark county, Norway. The sampling was purposive, aiming at achieving a heterogeneous group of interviewees regarding age, ethnicity and educational level (as shown in Table 1). This sampling strategy was utilized in order to capture central themes emerging within this variation (Patton 2002). The men were recruited through a written inquiry, distributed through their workplace, the local adult education centre, a senior activity centre, or local authorities' refugee services.

Table 1. The participants' pseudonyms, age, educational background, work situation and ethnic background.

Name	Age group	Highest level of completed education	Work situation	Immigrant/non-immigrant
André	40–49	Upper secondary school	Employed	Non-immigrant
Bjørn	40–49	Higher education	Employed	Non-immigrant
Christian	70–79	Secondary school	Pensioner	Non-immigrant
David	80–89	Secondary school	Pensioner	Non-immigrant
Elias	90+	Higher education	Pensioner	Non-immigrant
Frank	40–49	Upper secondary school	Employed	Non-immigrant
George	50–59	Higher education	Student/unemployed	Immigrant
Henry	40–49	Secondary school	Employed	Non-immigrant
John	50–59	Upper secondary school	Part time employed	Immigrant
Kevin	50–59	Higher education	Student/unemployed	Immigrant
Leo	40–49	Upper secondary school	Student/unemployed	Immigrant
Magnus	40–49	Secondary school	Employed	Non-immigrant
Noah	70–79	Higher education	Pensioner	Non-immigrant
Oscar	50–59	Higher education	Employed	Non-immigrant
Peter	40–49	Higher education	Employed	Non-immigrant
Richard	40–49	Higher education	Employed	Non-immigrant
Simon	50–59	Higher education	Employed	Non-immigrant
Theodor	60–69	Secondary school	Unemployed	Immigrant

Data gathering and analysis

A semi-structured interview guide was developed and tested in two pilot interviews. Since no major changes were made, the pilot interviews were included in the data. The interviews lasted between 60 and 100 minutes and were recorded and transcribed verbatim. The transcribed interviews were coded inspired by grounded theory methods as described by Charmaz (2014), through the stages of: 1) Initial coding line-by-line, and 2) Focused coding in order to develop or discover core categories or dimensions. Within grounded theory methods, the data is the starting point: topics and categories emerged through the coding and analysis (cf. Charmaz 2014). As an example, one main finding from the analysis of the interviews was the emergence of the category concerning shared meanings related to health, body and physical activity, and which were expressed by men with different backgrounds, and which is the focus of this paper. The coding was conducted by the first author, and cross-checked by and discussed with the second author.

Ethics

All participants gave their written consent to participate, and had the opportunity to withdraw from the study at any time. The participants were given pseudonyms to protect their anonymity, and details of age, education, work situation and ethnic background were limited in order to further protect their anonymity. The study received approval from the Norwegian Data Protection Official (NSD). The authors are highly educated ethnic Norwegian males in their 40s and hence typical representatives of a dominant group. Both are from rural areas themselves, but sojourners into the specific research context. Consequently, there is a balance of closeness and distance to the research phenomenon; and therefore we believe we have stayed reflective and conducted a proper analysis.

Findings and discussion

We merge empirical findings with theoretical discussions throughout this section. Nevertheless, we weigh some elements more in some subsections than in others, which is reflected in the structure of the section. First, we frame the overall analysis with Bourdieu. Then three empirically oriented subsections follow; physical activity, health, and body. Last, we discuss the masculinity elements of it all with Connell's theory.

Framing the analysis with bourdieu

Although men had heterogeneous backgrounds, and despite some nuances, they – to a large extent – shared the meanings related to health, body and physical activity. From a Bourdieuan point of view, the habitus shapes the ways in which these men constructed and expressed meanings related to health, body and physical activities. In other words, an explanation for the shared meanings must be a more or less shared habitus, or at least more or less shared “source” for their habitus. Habitus, in Bourdieu's universe, is an intermediary link aiming at bridging the objective structures and subjective preferences for, and experiences of, social practice. The point here is that habitus creates individual as well as collective practices (Bourdieu 1977, 1990). Bourdieu argues that habitus is the product of history and thus different individuals with different personal histories have different habitus (Bourdieu and Wacquant 1992, 126). With various personal histories and backgrounds (regarding ethnicity, education, age etc.), one would expect differences in the participating men's habitus, and thus variations in their meanings. However, Bourdieu also argues that individuals who live in the same context internalize the same objective structures in their habitus, and which in turn lays the ground for similar or shared practices (Bourdieu 1989, 231). All of the men in the sample live in the same area today, and are partly brought up and socialized into the same societal, cultural and geographical context. From that, one would expect some resemblance in habitus, and thus shared practices (here – meanings related to health, body and physical activity). Hence, the shared context in which the men live their lives forms their habitus in similar ways, and accordingly shapes similar meanings.

Bourdieu's perspectives should not be perceived as deterministic, since he does not deny that people make individual choices. However, he disputes that all choices made are conscious, systematic and intentioned (Bourdieu and Wacquant 1992, 24). Rather, free choices are assumedly controlled by habitus. With their various backgrounds the men in this study all spoke freely and personally about their relationship to the phenomena: nevertheless they spoke strikingly similarly. Ohl (2005) elaborates that habitus cannot explain behaviour ‘... without taking into account the context’ (244). Thus, an understanding of both the national and local contexts of the study is needed in order to understand the men's meanings.

Physical activity

Returning to the empirical findings, a remarkable similarity in the men's expressions was the significant value and meaning they gave to being outdoors during physical activity. We consider this conspicuous because it applied to all participants, irrespective of age, education level and ethnic background. André (non-immigrant in his 40s with upper secondary school as highest completed education) said: “I prefer to be outdoors. I would rather put on warm

clothes and go outdoors, than to take off clothes to be indoors.” In the same manner, Christian (non-immigrant in his 70s with secondary school as highest completed education) maintained: “I prefer to take a walk outdoors, I do.” The immigrant men also stated that they preferred to be outdoors when being physically active. Kevin, for example, responding to the question whether he preferred undertaking physical activity indoors or outdoors answered: “Outdoors. Absolutely outdoors.” Moreover, we found that the focus on being outdoors was not related to whether the interviewee was frequently or seldom physically active himself.

All in all, we identified three shared meanings related to being outdoors during physical activity, which reinforced and resembled each other: (i) a twofold motivation for being active outdoors (enjoyment of activities only possible to undertake outdoors and motivation related to the very fact of being outdoors); (ii) the sensory experiences of nature in outdoor physical activity (an experience of wellbeing and reduction of stress related to improved physical and mental health); and (iii) simply fresh air. We interpret the shared emphasis on being outdoors as an empirical example how the (same/similar) context in which the men live is seemingly reflected in the men’s talk. To us, it seems as though the men developed similar habitus in spite of different capital composition; and they do so through shared context and especially its masculinity. Let us elaborate. The construction and expression of the importance of close relations to nature and the importance of being outdoors when being physically active is arguably a practice partly formed by the local rural context in which certain outdoor activities, such as hunting and skiing, are important local cultural elements. Empirical support for this claim is found in earlier studies of rural masculinity where it has been shown that rural men’s practices are formed by the rural context in which they live (Aure and Munkejord 2016; Brandth 2002, 2006; Brandth and Haugen 2005; Bull 2009; Bye 2003, 2009; Gerrard 2013; Kenway and Hickey-Moody 2009; Trelle, van Hoven, and Huigen 2014). Although there are indoor possibilities available for physical activity, such as sport organizations and fitness centers that are as present in Hedmark as elsewhere in Norway (Seippel and Skille 2019; Virke 2017), the men choose to talk about outdoor activity. However, the expressed importance of outdoor physical activity can be partially seen as a practice formed by the national context of Norway, with its shared national values related to outdoor activity (Christensen 1993; Gullestad 1989; Strandbu 2000; Tordsson 2005; Witoszek 1998). According to Bourdieu (1990), the context in which they live is internalized in their habitus. Thus, our interpretation is that the shared context in which the men live their lives (the national context of the relatively gender-equal social-democratic welfare Norwegian state with its high health standards, high living standards and great cultural values attached to outdoor activities, and the rural local context of Hedmark County), forms the similar meanings among these men.

Health

Regarding health, the men expressed good health as experiencing wellbeing and having a good life. André (non-immigrant in his 40s with upper secondary school as highest completed education) expressed it this way: “I think that if you feel good and experience wellbeing, you have good health.” In the same manner, Christian (non-immigrant in his 70s with secondary school as highest completed education) stated “Good health is to experience wellbeing.” According to the men, wellbeing and a good life could be achieved through

experiencing four aspects of health which were largely shared by the men. Firstly, the men emphasized that wellbeing and the good life was to experience adequate functionality and the possibility and capacity to live a desired life. Richard (non-immigrant in his 40s with higher education) stated that for him health is to “feel that the body functions, and that I can do whatever I want to do. Everything from redecorating my house, hiking and physical activity.” Secondly, in order to experience wellbeing and a good life, the men needed to experience absence of illness, injury and pain. Noah (non-immigrant in his 70s with higher education) stated that “I relate good health to having good physical health – that I manage to stay free from illness.” Kevin (immigrant in his 40s with higher education) expressed that in his opinion “bad health is when one is ill or experiences pain.” Thirdly, experiencing good social relations with friends and family and a feeling of belonging in society were part of experiencing wellbeing and a good life. Noah (non-immigrant in his 70s with higher education) explains that

a good life for me is to enjoy doing things with my family and that I am happy at home with my wife. Take some care of my children, who are adults now off course. And support them in whatever they are doing. And follow up on my grandchildren, what they are doing at school and studies, and in their private life.

In the same manner Peter (non-immigrant in his 40s with higher education) states: “If your health is so bad that you are not able to maintain relationships with your friends, then you are definitely badly off.” Fourth, experiencing an acceptable body weight and body shape is part of the men’s understanding of wellbeing and the good life. The following quotation from George (immigrant in his 50s with higher education) is an example of the focus on the shape of the body as an aspect of health:

When it comes to appearance it’s good to be normal, you know. It’s not good to become too thin, nor too fat. Both are not so good for one’s health. But maybe some people like to become, you know, thin, but I don’t feel that way. Because being normal is always the best.

Although the underlying themes of understandings of what constitutes health were shared throughout the men, we identified nuances in what aspects of these meanings the men emphasized, for example in the men’s expression of absence of illness, injury and pain as a constituent of good health. Those who had experienced illness, disease, injury or pain focused more on this as an aspect of health than the men who had not. Another was the common emphasis on the social aspect of health – belonging, social relations to family and friends. However, the immigrant men, more often than the non-immigrant men, expressed the importance of belonging to the community as an aspect of health. On that empirical basis, we hypothesize that the local non-immigrant men in the study have a taken-for-granted attitude to this (belonging-health). While – at least some of – the immigrant men have experienced loss and lack of belonging during parts of their lives, and therefore have developed consciousness about it, a safe and inclusive social environment is doxic (Bourdieu 1977, 1990) for the non-immigrant men.

We conceive of this empirical example, of the shared understanding that above all good health is “wellbeing and the good life” and the basis for experiencing it, as indications of how talk and practice reflects the national context. This is formed by the fact that the men live in the wealthy welfare state Norway where, for most of the population, the basic conditions for achieving and experiencing good health (living conditions, food supply, clean

water, free health service, etc.) are generally good. We thus couple the empirical with both the local rural context and the national context of the wealthy welfare state, as creations of structures that form the men's habitus, and hence their expressed meanings.

Body

Also regarding considerations about body, the men expressed largely shared meanings. We identified three important and shared meanings about body. First, the men emphasized the importance of functionality, which we see as intertwined with the importance of bodily functionality as an aspect of health. Simon (non-immigrant in his 50s with higher education) expresses this notion in the following way: "For me, it is important to have a functioning body. Because that eases the everyday life. It is in the basis of well-being." Second, they consequently expressed a close relationship between the body and their health. Peter (non-immigrant in his 40s with higher education) illustrates the strong link between health and the body: "The body is a whole, so ... The mental and the physical part, they influence each other. That's how I look at it then. And when you have a good physical health, it affects your mental health." The importance of the body's functionality as an aspect of health was common; however, the expectations towards bodily functionality seemingly changed with age. Younger men focused on functionality in work, leisure time and sport activities, while older men frequently expressed the perception of health as the capacity and functionality to manage the more basic day-to-day demands of everyday life. Third, the men emphasized the shape and appearance of the body. The body's appearance was of common importance – both in relation to how their bodies were perceived by others, and in relation to their own perception of their body. Christian (non-immigrant in his 70s with secondary school as highest completed education) expressed his meanings about appearance in this way:

After all, I do want to look acceptable, so that one doesn't scare people away... But I have to say that I go around and am reluctant, because I have these huge scars from surgery, so I have scars here and a bit swollen belly. (while drawing lines over his chest with his finger). So, like, I am a little concerned about that when I'm going to the beach and such. I don't like that.

We found no differences found in relation to age, ethnicity or other social dimensions regarding body appearance. Even if the men expressed that they did care about their body's appearance, they were seemingly uncomfortable about expressing their preoccupation with body appearance. When they talked about their own body's appearance the men hesitated and talked more incoherently; some started using humor and laughing more. Another quotation from André can function as an example of the men's talk:

Yes, it's ... Ehh ... I have noticed ... Well, it is OK. But I'm going to... I'm going to get rid of that tummy a bit. It is unnecessarily big. And I ... Yeah, I sleep well at night anyway, right. (Short laughter).

Our interpretation is that the men clearly cared about their body's appearance. Simultaneously, they expressed a feeling that they should not care.

Arguably, in addition to – or as part of – being formed by the context, the men's construction and expression of meanings related to health, body and physical activity can be understood as gendered practices. An example of this is the men's discomfort when expressing the importance they attach to the body's appearance. With some recent exceptions, existing research has established that men should not be too occupied with their bodily appearance (e.g. Heiman and Olenik-Shemesh 2019; Hervik and Fasting 2016; Ricciardelli and White 2011).

Connell's masculinity

To analyse the gender aspect of the men's meanings, we include the theory of hegemonic masculinity. We argue that Bourdieu's theory of practice offers a conceptual framework for theorizing the structure/agent problem and understanding the agent's practice. However, Bourdieu's original writings have been criticized for failing to grasp the complexity of gender (Connell and Messerschmidt 2005). Connell, on the other hand, offers a theoretical framework for gender relations although with insufficient potential for theorizing practice. Connell's theory of hegemonic masculinity has been criticized for underestimating men's subjectivity and agency (Giddens and Sutton 2013; Whitehead 1999), for being static and macro oriented, and failing in 'revealing the complex patterns ... which constitute everyday social interaction' (Whitehead 1999, 58). We suggest a theoretical combination of Bourdieu and Connell well aware of Connell and Messerschmidt (2005) criticism of Bourdieu 'seeing the gender relations as a self-contained, self-reproducing system' (844) – plus an empirical basis of laypersons – as our solution.

The three levels of hegemonic masculinity – local, regional and global – all are parts of the context in which the men live, and hence parts of the objective structures forming the men's habitus. In that respect, men in similar contexts develop a common understanding of what are the "right ways" for a man to act. Accordingly, the men's construction and expression of meanings related to health, body and physical activity are formed by their habitus which, in turn, is formed by social structures including global, regional and local hegemonic masculinity.

Hence, the men's preoccupation with weight and appearance of the body, and their discomfort with expressing it, are both practices formed by the national and local context, and reflections of the regional and local hegemonic masculinities. Arguably, the men's construction and expression of meanings related to the appearance of their body is a way of balancing a "should care/don't care" dichotomy. We perceive the discomfort the men exhibited when they talked about their bodily appearance as a reflection of that when talking about one's bodily appearance is in conflict with the local hegemonic masculinity. However, valuing the functionality of the body did appear appropriate since this indicates a hegemonic form of masculinity.

Moreover, aggregating the elements of the results, we conceive of them as indications of a local hegemonic masculinity, which is formed by both the local and national (regional in Connell's conceptualisation) context, and lays the ground for acceptance of practices traditionally not associated with rural masculinity. We find support for such a claim in other empirical studies of rural men in Norway (Brandth and Overrein 2013; Bye 2009). However, our sample of men also constructed and expressed meanings related to health, body and physical activity which, in earlier studies, were associated with more traditional (hegemonic)

rural masculinities – hereunder the importance of hunting, fishing and physical work (Aure and Munkejord 2016; Brandth 2002, 2006; Brandth and Haugen 2005; Bull 2009; Bye 2003, 2009; Gerrard 2013; Kenway and Hickey-Moody 2009; Trel, van Hoven, and Huigen 2014).

Concluding remarks

Discussing how different men living in the same context expresses largely shared meanings about health, their body and physical activity. An important empirical contribution in this study is acknowledging the importance of both local and national contexts in shaping such meanings. National ideals and values which, for example, reflect the social-democratic welfare regime, contribute to form the practices of the men, as do local values and ideals that consequently differ throughout the country. In sum, global, regional and local masculine hierarchies are parts of the contextual social structures that form the men's meanings related to health, body and physical activity.

The participating men's construction and expression of meanings related to health, body and physical activity are ways of practicing masculinity. In addition, these practices are one way by which the men achieve positions in a given field and in social space. The men's practices (construction and expression of meanings related to health, body and physical activity) are reflections of masculinities that are appropriate in their local context, and hence reflect the local form of the hierarchy of masculinities. Thus, these practices also position the men in the local masculinity hierarchy (in relation to the local hegemonic masculinity). In that respect, Bourdieu's concepts, especially that of habitus, helped us identify and name the "shared masculinity."

Even if the men in this study express shared meanings related to health, body and physical activity, it is important not to understand and treat men as a homogeneous group in relation to health beliefs and health practices. Robertson and Gough (2010) argue that it is not sufficient to recognize men's diversity in relation to health-related practices through focusing on difference in social backgrounds. They point to the importance of the context and stage of life, noting that men's relation to health "can vary in the same man at different times and in different locations" (233). For example, age and gender are intertwined in how people make sense of their health (Calasanti et al. 2013) and their bodies (Pietilä and Ojala, 2011). In the present study, while it is important to consider men's backgrounds (embodied in their habitus), the common context in which they live (including the regional and local hegemonic masculinities) is most significant in our analysis and understanding of the men's relations to social phenomena such as health, body and physical activity.

Despite diverse backgrounds, the common meanings expressed concerning physical activity, body and health are perhaps analytically best explained by the concept of masculine capital. When combining the line of thought from the theory of practice with the theory of hegemonic masculinity, it follows that not only does the volume of masculine capital held by a man position him in the social space, it also positions him in the local masculine hierarchy. If a man displays a certain amount of the appropriate masculine capital, he will do a local hegemonic form of masculinity. Based on this theoretical line of argument, we maintain that the participating men's construction and expression of meanings related to health, body and physical activity are practices through which they accumulate and display several forms of capital – also masculine capital. The men's construction and expression of

meanings are reflections of masculinities that to different degrees are appropriate in this local context, and hence reflect the local hierarchy of masculinities.

In other words, our main contribution to the research field is that hegemonic masculinity (on all three layers/levels) is a part of the social structures that make up social space and that creates habitus. In that respect, the degrees to which the men's expressed meanings coincide with hegemonic masculine values position them in the masculine hierarchy as well as in social space. It is a paradox that different backgrounds, which in one sense should theoretically lead to different habitus, which subsequently should lead to a variation of meanings, actually and empirically seem to be expressed as very similar and agreed meanings. One explanation is masculine capital crossing contexts.

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