'I was so done in that I just recognised it very plainly, "You need to do something"': Men's narratives of struggle, distress and turning to meditation.

Abstract

Traditional masculinities can mean men are unable or unwilling to deal constructively with distress. However, researchers increasingly acknowledge that men and masculinities (including hegemonic styles) are diverse. Moreover, men can positively manage their well-being, although little research explores how they do so. Uniquely, our study sought to find men who report finding ways to care for themselves to examine narratives about how such self-care originated. We aimed to do this by exploring issues underpinning men's journeys towards meditation, focusing on implications for well-being. In-depth interviews were conducted in 2009 with 30 meditators, selected using principles of maximum variation sampling, and analysed with a modified 'constant comparison' approach. Men's journeys toward meditation were fraught with difficulties. Men described crossing a threshold from boyhood into 'manhood' where they encountered traditional forms of masculinity (e.g. stoicism), and most described subsequent strategies to disconnect from emotions. While men eventually found ways to engage more constructively with their emotions and well-being, this paper explores the struggle and distress of their journeys.

Masculinity and distress

Gender differences are frequently noted in rates of common mental disorders, e.g. anxiety and depression, with rates in England of 19.7% for women, against 12.5% for men (McManus et al., 2009). However, there is concern that men may express their distress in other ways, with men three times more likely to commit suicide than women (ONS, 2011). While distress is often ill-defined, it refers to mental suffering, representing 'an unpleasant emotional state' (Gadalla, 2009: 2200), and is often used to denote negative subjective experiences that fall short of clinical diagnoses for mental disorders (Green et al., 2010).

Some commentators argue that rather than 'internalising' distress as sadness, for example, men are more likely to 'externalise' it in ways including aggression, risk-taking, and alcohol use (Pollack, 1998). For instance, in an Australian study of people who identified as being 'down in the dumps,' men were more likely to try and avoid feelings of distress, e.g. through numbing or escape behaviours, until these culminated in a 'build-up,' including aggression and suicide attempts (Brownhill et al., 2005). Men are also considered in most research as less likely to seek help for distress and disorders, being less willing than women

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to disclose vulnerability, and setting a higher threshold of distress before help is sought (Riska, 2009).

Male patterns of distress have been linked to 'traditional' forms of masculinity, to the extent that men and masculinity collectively are viewed as a risk factor for health in the media (Gough, 2006). In academic literature, as Mac an Ghaill and Haywood (2012: 483) elucidated, much research also adopts a 'simple gendered frame based upon singular categories of male and female,' constructing men in a uniform way as 'damaged and damage doing.' Nevertheless, other research is more nuanced, showing variation among men, while often linking dominant forms of masculinity to unhealthy behaviours (Courtenay, 2000).

At the intersection between gender and the production of emotion, theorists have highlighted the way emotionality is often feminized, while traditional forms of masculinity valorise emotional suppression, toughness and outward strength (Lupton, 1998). It is argued that adherence to such norms contributes to how men experience and express distress. Addis (2008) outlines a range of frameworks for understanding men, masculinity and depression. Among these, Addis advances the 'gendered responding framework,' which suggests that gendered socialisation encourages men to adopt maladaptive stances toward emotions, for example, learning to suppress negative feelings. Addis further suggests this suppression may contribute to mental health problems via promoting poor emotional regulation skills. Such emotional dysregulation may be a critical trans-diagnostic factor underlying various mental health problems (Aldao et al., 2010). Additionally, traditional masculine norms around toughness can promote demands that exacerbate distress in other ways. For example, in the 'masculine depression framework,' masculine norms are thought to create 'gender strain' as men attempt to enact unattainable ideals, e.g. suffering in silence (Pleck, 1995).

Variation within masculinities

Despite links made between traditional masculinity and distress in the literature, relational theorists, notably Connell (1995), have proposed a more dynamic reading of gender. Rather than conceptualising gender in an essentialist way as 'a fixed entity embedded in the body or personality of the individual,' such theorists view gender as 'configurations of practice,' emerging in the course of social interaction and varying according to context (Connell and Messerschmidt, 2005: 836). Connell's (1995) theory acknowledges the diversity of masculinities that are constructed and enacted through everyday practices. Here, different masculinities are considered to exist within hierarchical relationships in any one setting, with a particular pattern of gendered behaviour culturally authoritative and dominant. This

'hegemonic' masculinity – 'the most honoured way of being a man' in a particular locale – exerts power over 'marginalised' masculinities through its normalising power to frame behaviours as natural (Connell and Messerschmidt, 2005: 832). For example, homosexuality is usually considered a marginalized masculinity (Connell, 1995), policed through societal censure, including harassment (Warner et al., 2004). Moreover, such censure extends to heterosexual men who enact qualities regarded as 'feminine,' e.g. expressive emotionality (Schippers, 2007).

Connell and Messerschmidt's (2005) more recent formulation of the theory emphasises the multiple, historical, local, and dynamic nature of particular configurations of hegemony. These configurations have been studied at varying levels of scale, from a national level (Munn, 2008), to smaller, more specific groups, such as Norwegian lumberjack workers, where hegemonic ideals shifted from initial 'weathered' appearances to the wielding of heavy machinery (Brandth and Haugen, 2005). The idea that particular 'communities of practice' can encourage certain patterns of gendered behaviour, is helpful in understanding how local forms of hegemony emerge and are shaped (Paechter, 2003; Creighton and Oliffe, 2010). However, not only can hegemony have multiple, shifting meanings, men are seen as taking up different subject positions in relation to these meanings according to need. So various enactments of masculinity represent not different types of men, but rather the way men may strategically 'position themselves through discursive practices' according to the dynamics of the social situation (Connell and Messerschmidt, 2005: 841).

Men engaging with well-being

Recognition of how hegemonic ideals can shift with various social configurations has led to more nuanced conceptions of the relationship between masculinity and health. Contrary to the 'masculinity-as-risk-factor' model, some theorists have argued against drawing straightforward links between masculine forms and negative health outcomes (Sloan et al., 2010). This applies to mental health, where researchers have examined how men have been able to challenge or reinterpret masculine ideals to find more constructive ways of relating to distress, and emotions generally. Studies have emphasised that men are not inevitably emotionally disconnected, and can talk openly and insightfully about emotional experiences, even around sensitive issues (Oliffe, 2005). Studies have explored how men have been able to respond to experiences of depression, for instance, in relatively constructive ways.[i] Emslie et al. (2006) discovered that some men were able to frame their depression experiences in a positive light, creating a valued sense of masculinity based on enhanced sensitivity and

independence from 'macho' norms, i.e. challenging hegemony. In contrast, other men positively constructed their plight in ways that aligned with hegemony, such as a 'heroic struggle.'

Men have long been overlooked and undertheorised in mental health research (Riska, 2009), and there are calls for greater understanding of men's subjective experiences of distress (Ridge et al., 2011), particularly in terms of exploring the heterogeneity of men's approaches to their mental health (Addis, 2008). In light of promising studies suggesting that some men are able to cope adaptively with difficult emotions, more research is needed to explore how they are able to do so (Chuick et al., 2009). Research into men's constructive engagement with their mental health is generally limited to coping with depression or cancer, with assessment of engagement often confined to help-seeking (Ridge et al., 2011). There is no research examining men's own strategies for engaging with distress, or well-being generally. Well-being is a multidimensional construct which, in psychological terms, refers not only to the absence of disorder and distress, but also the presence of positive subjectivity, including affective experiences of pleasure and cognitive judgements of life satisfaction (Deci and Ryan, 2008).

Consequently, our study sought to find a group of men who were likely to have found ways to self-manage their emotions and well-being, with the aim of exploring why and how this self-management came about. It was envisaged that men who meditate may represent such a group, since meditation is associated with positive outcomes on numerous mental health indicators (Mars and Abbey, 2010). Meditation is considered to involve 'training attention and awareness in order to bring mental processes under greater voluntary control and thereby foster general mental well-being and development' (Walsh and Shapiro, 2006: 229). However, despite wide-spread interest in meditation across diverse research domains, few studies have discussed meditation in the context of masculinity, and then only in passing (Reddin and Sonn, 2003). We are unaware of any studies specifically exploring meditation in relation to masculinity and men's mental health.

Methods

Overview

The study elicited narratives via one-to-one semi-structured interviews with a sample of 30 men recruited using a maximum variation sampling strategy (Marshall, 1996), analysed using a 'constant comparison' approach (Strauss and Corbin, 1990). Such interviews facilitated exploration of the issues and complexities of the topic, and allowed men's own meanings and

priorities to emerge (Emslie et al., 2006). The research question was: How do men account for their turn towards meditation? The aim here was to explore issues underpinning men's journeys towards meditation, and implications for well-being. The interviews were conducted in 2009.

Participants

Inclusion criteria were that men must be over 18 and currently practice meditation in some capacity, though not as part of a clinical intervention. A purposive sampling design was used, specifically maximum variation, which aimed to include the widest practical range of life experiences, socio-demographic backgrounds and meditation experience (Marshall 1996). Here, recruitment was mainly through a meditation centre in London, UK, supplemented by recruiting at various other events in London attended by meditators, such as Buddhist talks. The first author met senior teachers and administrators at a meditation centre to gain their cooperation on the study, and they acted as gatekeepers, introducing him to participants. Snowball sampling occurred through participants and their contacts. Recruitment ended once saturation was reached (additional interviews did not generate any substantial new themes of interest). In total 30 meditators were recruited. Sampling occurred concurrently with initial stages of data analysis, with the emerging analysis suggesting the inclusion of certain men to increase the robustness of the analysis (Cutcliffe, 2005). A diverse sample of participants was obtained as outlined in Table 1, all of whom lived and/or worked in London. In terms of men's interaction with other meditators, 22 were involved with one particular meditation centre in London which the recruitment focused on: ten men lived there, seven attended regularly and five visited occasionally. Four more men were linked to other centres; four were unaffiliated with any centre.

[Insert table about here]

Data collection

Interviews were semi-structured, conducted by the first author, and lasted around two hours on average, although the shortest was 72 minutes and the longest over four hours. Participants chose to be interviewed in their own homes, at the University, or at the meditation centre. An interview guide was devised in consultation with the literature and the research team, and revised after initial interviews. Prior to the interview, participants signed an informed consent form and completed a demographic survey. The project was approved by the University

Research Ethics sub-Committee, and an ethics protocol was in place to ensure the well-being of participants.

Interviews aimed to elicit men's narratives concerning their engagement with meditation. Narratives order events in time and reflect how people construct and represent meanings about themselves and their lives (White, 1987). The interview approach was designed to be sensitive to men, providing a safe space in which they were encouraged to tell their own story in their own words (Minichiello et al., 1995). The first part of the interview focused on narratives regarding life leading up to, and following on from, involvement with meditation. The opening injunction ('Tell me something about life before meditation') enabled participants to begin their narrative at any point in their life history, and to include any aspects of their lives they felt to be relevant. Narratives were pursued up to the present, and looking ahead to the future. The second part of the interview focused on specific areas of interest, including: well-being; stress; coping; masculinity; relationships; social life; work; spirituality; and meaning. Participants received £20 to cover expenses for taking part. The remuneration was set at a level to avoid it acting as an inducement to participate.

Data analysis

Interviews were professionally transcribed. Names of people and places were removed, and some details altered (e.g. professions) to protect identities. Transcripts were sent electronically to participants for approval, which all men granted, although five requested the removal of additional details they felt could identify them. The NVivo software package was used to help code, organise, search and analyse the data. The data was explored using a 'modified' constant comparison approach, focusing mainly on open and axial coding (Strauss and Corbin, 1990). Modified constant comparison follows the steps of modified grounded theory, while also linking back to existing literature to clarify the emerging analysis (Cutcliffe, 2005), in this case, Connell's theory of masculinities. However, unlike grounded theory, constant comparison may fall short of developing a theoretical framework, aiming more to identify and articulate inter-relationships between the key themes. In an initial coding phase, interview transcripts were examined paragraph by paragraph to identify emergent themes (themes form the basis of all qualitative analysis, Braun and Clarke, 2006). This paper concentrates on the data pertaining to participants' lives before meditation, leading up to and including their initial meditation experiences. Around 20 prominent codes were identified, such as 'crossing into manhood,' and 'trying to be tough. ' The next stage involved generation of a tentative conceptual framework: codes were compared with each other, and

grouped into four overarching categories according to conceptual similarity. For example, the themes mentioned above created the category of 'becoming a man.' The other categories were: emotional distress; coping responses; and turning to meditation. These categories constitute the four main sections below. The final stage involved fleshing out the properties, dimensions, and interrelationships between these categories and codes.

Limitations

Aspects of the study could be construed as limitations, but may also be seen as contributions too. Reflexivity requires an acknowledgement that the telling of personal stories is to some extent a performance – and a gendered one – and that the data gathering process shapes the way experiences are recalled and presented. For example, research interactions can represent an opportunity for men to perform masculinity as they engage in 'identity work' (Allen, 2005). As outlined below, however, participants' presentations of self may highlight interesting ways in which men construct masculinity, at times reinterpreting and even contesting hegemonic norms, in other ways reinforcing them. Thus, while not necessarily generalisable to all men, the findings below are likely to be of interest to all those interested in understanding men's mental health experiences, and helping men engage with well-being in more constructive ways. More generally, this study highlights the limitations of viewing men in homogenized terms as 'damaged and damage-doing,' and shows that men can be emotionally capable in ways that are often underappreciated.

Results

There was considerable variation among men; however, in this paper we focus on common themes to highlight issues which may have broader relevance to men and well-being. One overarching explanation for engaging more constructively with well-being emerged from our analysis: most men narrated their decision to begin meditating as being a response to feeling something was not right in their lives – e.g. they were ill-at-ease, or in crisis. Under this broad theme, there were four interlinked themes:

- Men felt hegemonic pressure during adolescence to become a man and be emotionally 'tough.'
- Toughness was linked to problems regulating emotions, and a sense of inner turmoil and distress.
- Men responded to this distress in various ways which were ultimately experienced as ineffectual.
- Men eventually turned to meditation as a potential solution to their problems.

These themes are discussed in turn below, illustrated with interview excerpts. All names are pseudonyms.

Hegemonic pressures to become a man

> The Cure had a hit with 'Boys don't cry'. I remember it meaning a lot to me, 'Oh yeah, I'm not supposed to cry.'... This old conditioning, being a man... (Dalton)

Many men told a story of experiencing pressure to 'be a man,' especially in terms of being emotionally tough, both inwardly (not 'having' emotions) and outwardly (not showing them). These pressures were often portrayed as emerging or becoming particularly salient during adolescence. Although only some men focused their narratives on their childhood, many highlighted adolescence as an important period, particularly in terms of the formation and development of their masculine identity. Many referred to a pivotal pre/early-teenage period where they constructed crossing a threshold from boyhood into manhood. Although this period in men's lives held positive memories, such as increased freedoms, and a few focused entirely on its benign aspects, most recalled it as a difficult transition in retrospect. The transition was linked to specific social events, like parental divorce, or moving to secondary school:

> A very happy, stable family upbringing in suburbia... a safe, protected bubble... The big change happened when I went to secondary school. That was my first experience of life as a tough, hard environment. (Steven)

This crossing the threshold was linked to a sense of vulnerability and mission. Here men recalled feeling threatened by a world that was experienced as more challenging than before. However, at the same time, they remembered having a sense that they should 'become a man.' Toward this end, participants described trying to fit with traditional forms of masculinity, for example being emotionally tough, at least partly as a way of coping with their vulnerability. Toughness involved suppressing, denying or disconnecting from feelings like fear and sadness, as well as not showing vulnerability.

> I remember my mum talking about my grandfather, he was as tough as old boots, he didn't have 'emotions.' There was a lot of that growing up... 'You don't want to be soft.'... I remember a sense of, 'I'm grown up now.' It seemed to happen over night, 'I shouldn't cry anymore.' I went to a new school, had a difficult time. I thought, 'I've got to face this alone.' (Dalton)

Men also recalled acting tough during the threshold period because they wanted to fit in and be 'one of the lads,' involving displays of bravado and 'attitude.' Participants discussed finding it hard to resist such expectations. Some men linked their behaviour in hindsight to feelings of insecurity, describing it as an attempt to emulate others who appeared to possess confidence that they themselves lacked.

> I never quite felt like a man... I was trying to emulate some kind of manhood... That came from feeling insecure... Images of hip hop got more aggressive... I bought into that in a real way. They have a swagger, an attitude, they carry a confidence. To not feel anxiety, that's a lot of what it stems from. (Ernest)

Participants' descriptions of three types of family relationships during this period had some resonance to attachment theory (Bowlby, 1973). Here, participants discussed three kinds of attachment: 'dysfunctional' (relative absence of care and support), 'facilitative' (caring, nurturing environments which encouraged independence) and 'constricting' (caring yet overbearing support that discouraged independence). Ernest recalled a dysfunctional attachment: 'At 13 I was badly beaten up by [a relative]. I left home and spent the next ten years being passed from pillar to post, not really having a sense of place.' In contrast, Sam described a more facilitative bond: '[My parents] found it important that I would live my life the way I wanted. They were concerned... but always very, very supportive.' Finally, a constricting environment was depicted by John as follows: 'Very supportive family. A little bit, not claustrophobic... smothering.' The few men who felt better able to resist hegemonic pressures also described 'facilitative' upbringings. For those with dysfunctional families, lack of support during the threshold period was described as accentuating feelings of vulnerability, encouraging emotional blunting as a response. For example, Steven recalled being 'shoved sideways' aged 13 when his parents divorced. Subsequently he suggested there was 'no emotional connection with them... I can hardly remember leaving home, it just doesn't mean anything.' For those with constricting backgrounds, lack of encouragement of agency appeared to entail less independence to challenge hegemonic expectations. Ali recalled how he did not pursue his desired healthcare career because his parents saw it as 'something a girl does.'

Problems regulating emotions and distress

Men often described the ideals of masculinity available during adolescence as modes of behaviour which they felt did not reflect who they 'really' were. Using the language of 'inauthenticity,' they described how expectations about how they should be as men created unease and conflict. As Kris explained, 'I was trying to fit in... be one of the lads, when I'm not... doing things, not being comfortable with it, but not really knowing why.' For some men, this sense of conflict was not simply between a public and a private self, i.e. not being themselves around others. Some described internalising hegemonic expectations, and feeling that aspects of themselves (e.g. vulnerability) were 'wrong.' Many discussed how they denied or suppressed such feelings by pushing them 'underground,' and how this could create internal conflict between acceptable and unacceptable aspects of themselves.

The above phenomenon was particularly evident in the domain of sexuality. Nine participants were gay, and most presented a painful story about difficulties integrating their sexuality into their identity. Although gay participants shared many themes with heterosexual participants, hegemonic norms in relation to sexuality meant these men often felt particularly marginalized, with additional burdens. Such marginalization had more severe outcomes in the narratives of older men, some of whom recalled homosexuality being illegal and frightening when they were young. Some described internalising these cultural prohibitions, and feeling shame. Henry recalled: 'I was working really, really hard at, "No, it's not there." A lot of misery. It nearly killed me.'

As men entered new social worlds in adulthood, some found hegemonic norms shifting away from traditional masculine qualities, towards other variations which introduced new pressures. Michael, for example, later moved within feminist circles that had differing expectations of masculinity, with new internal conflicts created by his gender strategy to become a 'this sensitive New Agey man,' which seemed valued in such circles:

> I'd taken on I should be more like a woman. It meant I had a much darker shadow side, which didn't come out. Not allowing myself to know it, feeling guilty.

At an extreme, some men described the fragmentary experience of not successfully negotiating multiple social contexts, each of which appeared to require a particular kind of man. William recalled being 'blokey' with male friends who wanted 'somebody to get pissed with;' for female friends, a 'good listener' and a 'shoulder to cry on;' with colleagues, 'competent and serious.' The varied nature of these gendered performances, and the way his

identity seemed to shift according to context and expectations, often left him feeling confused.

> I'd think, 'What am I? Who am I?' Utterly lost, a different person for different people... liked by a lot of people, but because I was revealing to them only... the bit they connected with. There would be all these different bits of me... I used to feel like I didn't have very much inside me.

Other men echoed this theme of inner confusion and fragmentation. Some articulated how, having been encouraged to dissociate from emotions, they experienced their internal world as a hostile, foreign territory. These men described having little means of engaging constructively with their inner life, and narrated a sense of powerlessness and bewilderment. Dustin recalled how 'there was no planning to [my life]. The wind took me rather than where I decided I wanted to go,' and that 'most of my life has been survival mode.' Many men presented moving stories of experiencing considerable distress, which was frequently portrayed as connected to their perceived lack of centre and emotional control. This inability to cope was linked by men to feelings of anger, destructiveness and suicidality.

> I was always battling, had suicidal thoughts. It comes out of a sense of you've got nowhere to go with your own mindset... The internal stuff was so strongly negative, it would be triggered and I would be, 'I want to be obliterated, I want to be annihilated... I don't want this pain.' (Colin)

Ineffectual responses to unease and distress.

Although most participants described experiencing emotional problems of some form, they generally did not explicitly seek constructive help. Instead, they spoke of hoping that various ways of being a man – relationships, hedonism, work and success – would help to 'sort out' their problems. As Andrew put it, 'take drugs, drink, possess things, people, relationship, career, whatever.' However, these strategies were ultimately portrayed as unsuccessful.

Men's narratives often turned towards to romantic relationships, for many reasons. Some focused on their positive rewards. Michael spoke about feeling good ('Love... makes you feel wonderful.'), and Sam highlighted sexual excitement ('We stirred up lots of energy.'). Alvin said his girlfriend improved his self-understanding ('She helped me talk through some of my stuff.') and facilitated self-expansion ('She broadened my horizons.'). Others reflected on how they had looked to relationships to fix or distract from their issues. Ernest suggested he used relationships to avoid negative emotions ('Distractions from

looking within.'), while Silas sought emotional safety in monogamy ('Looking for some kind of security.'). Colin described hoping to find a solution for his unhappiness ('I knew I wasn't happy, but I figured a relationship would sort that out.'), as did William ('Looking for the one person I could put all my hopes on and we'd live together forever and it would be blissful.'). Participants described how, when relationships flourished, they did feel content. However, this happiness was portrayed as 'precarious,' as it was contingent on the success of the relationship. Moreover, many men discussed relationships in the context of them failing.

> Whenever... it didn't work out I'd be absolutely crushed, feeling suicidal. I used to think, 'Do I have anything inside me holding me together?' I'd be utterly bereft... just this cold nothingness inside... literally like you don't have a heart. (William)

Many men discussed turning to alcohol and psychoactive substances. Like relationships, these served different functions. Some men highlighted their pleasurable effects. Jack was attracted to the hedonistic opportunities drugs offered ('Intensifying experience with pleasure.'), while Terry described how marijuana initially enabled a sense of freedom ('Euphoric... more creative, more light.'). Others suggested that drugs could be used to ameliorate emotional issues, e.g. blunting negative feelings ('A subduing effect on the emotional life.') or overcoming feelings of isolation ('Relief from the pain of being a separate somebody.'). However, some acknowledged in retrospect that substance use could also become a form of self-medication: lacking skills to engage directly with their problematic emotional world, substances became an indirect way of regulating emotional states. However, although this 'strategy' was initially described as successful, men eventually portrayed it as 'maladaptive' because it tended to exacerbate problems.

> I [had] really difficult times with my mental state, depression, stress, anxiety. My self-medication was smoking far too much dope. It's hardly surprising I became hooked because it was such a strong, marked difference... an easy quick fix to all the pain I was carrying around... [But] it end[s] up exacerbating it in the long term... All the paranoia and the neuroses just get bigger. (Terry)

Some participants hoped to find happiness through work as a source of fulfilment. Although some discussed work simply as a functional necessity, others invested emotionally in their vocations. For example, Silas recalled choosing a career in healthcare after 'a moment of vision that I just wanted to care for people.' However, even for these men, the context for

mentioning work was generally in terms of articulating their difficulties coping with its pressures. Silas recalled:

> [Going from] living from one's ideals, to a process of disengaging [was] painful...
> The sense of resentment, the sense of lack, inability to respond in the way I used to...
> It [was] burnout.

Others indicated that the rewards work brought had failed to deliver the satisfaction they had hoped/expected it would. Alvin recalled that having initially wanted to work in finance, after 'living in a block full of investment bankers, it's the last thing I want to do... They were all miserable as sin.'

Men also discussed hobbies. These seemed to be the most reliable source of contentment in the narratives. Some men highlighted social aspects. Others mentioned the appeal of experiencing 'absorption,' which some would retrospectively identify as a form of meditation. Robert described how, playing the piano, 'consciousness is absorbed on one thing, it becomes contemplative.'

Turning towards meditation

Although men had different reasons for turning to meditation, they began meditating when they felt that whatever was wrong in their lives – unhappiness, distress or just something 'missing' – could not be addressed by the ways explored above (relationships, hedonism, work and leisure). A few men recalled beginning to meditate after actively looking for 'meaning' in early adulthood. These men described wanting a life based on more than just hedonism and work, and actively explored various philosophies (e.g. existentialism) and spiritual practices. Here, meditation was identified as a possible vehicle for meaning, and subsequently embraced as such. These participants' narratives were less concerned with themes of emotional toughness and distressed subjectivities. Such men were mostly from upbringings portrayed as 'facilitative;' there was some suggestion that their freedom to explore was enhanced by a favourable socio-economic background.

> [I had a] very stable background... It was like, 'What am I going to do with this life?
> I've got an opportunity here.'... A strong desire for meaning right from an early age.
> (Peter)

Conversely, in some cases, men indicated that an early curiosity had been stifled by life demands, e.g. a less privileged upbringing. For example, for Grant, the pressure to forge a

career in restrictive economic circumstances took priority over a youthful interest in spirituality until later:

> You had to make your own way as quickly as you could... I was too busy getting on with making a living. So a lot of things were just quietly forgotten about until I had a bit more space.

Thus, most men did not find meditation early in life, and described trying and failing to find happiness or alleviate distress in ways discussed above. Within this, some recalled looking for better ways of managing their stress and distress. These men were not explicitly looking for spirituality, but had sometimes 'dabbled' with Buddhism before, remained open to it, and tried meditation when life became sufficiently difficult. Harry had been drawn to meditation at university, but lacking peer support, turned away from it ('It was all too scary at the time.'). He re-engaged with it 20 years later, during a particularly difficult period in his life.

> [The stress] was enormous... Nerve endings tingling, high blood pressure, high performance... [Meditation] took the edge off it, kept me on a reasonably even keel.

Some men began meditating as a result of difficult existential questioning. These men described feeling unhappy, 'lost,' or experiencing life as lacking meaning, and they questioned their values and priorities. Unlike those who found meditation through explorations around meaning in early adulthood, these men tended to articulate a sense of desperation and despair. For some, this story centred on a period of seeking, e.g. travel to Asia. In this mode of seeking, participants described being intrigued by meditation, identifying it as a potential source of meaning. Shortly after finding meditation, Dean recalled saying to his wife: "This is it... the furrow that I need to plough."' He said, 'I've always wondered, "What do I base my life on?" And [this] feels like it.'

Finally, around a third of participants articulated dramatic narrative shifts where engagement with meditation was precipitated by a crisis or mental 'breakdown.' They described how, despite distress, they initially did not seek to change. For example, many regarded alternative strategies like meditation as too 'flaky' for the rational man they saw themselves as, often emphasising the impact of moving within well-educated, secular social spheres in modern-day London ('I thought, "I'm not a spiritual person... all a load of rubbish, wishy-washy, hocus-pocus, airy-fairy."'). Some remembered feeling there was 'no way out.'

Dalton recalled: 'I saw an endless life stretching ahead of me. It just seemed a bit pointless, the whole thing, and there didn't seem any relief.'

These men narrated a build-up of distress. This was depicted as leading to a tipping point, where a negative event, often a relationship break-up, was highlighted as the catalyst for an emotional crisis.

> I was in a relationship with someone that didn't work out... I just had a really big dip... Lots of things came to a head, stuff that had been stored up for years... I went really downhill to rock-bottom. (Terry)

Although men tended to view these crises retrospectively with some gratitude as turning points, such crises were described as involving serious problems. Five of these men suggested they had actually experienced depression during this time. These men sometimes sought the intervention of a psychotherapist, yet described reluctance to seek help.

> I had a view that only people who were incapable in some way had therapy, who were weak... [However], I was so done in that I just recognised it very plainly, 'You need to do something.' (Silas)

Therapy was valued for various reasons, most prominently in terms of allowing men to express emotions they had learned to suppress. Terry recalled needing 'someone that would really, really listen and take my distress seriously.' Once they were sufficiently contained in therapy, some recalled being encouraged to try meditation by their therapist as a way of going forward constructively. They described how meditation helped them with their emotional problems.

> I just feel generally better in myself, more in control of my life, less anxious about things, more balanced, saner... It teaches me how to be more aware of what's going on, which then helps me in other situations, being calmer... more positive emotionally. (Terry)

Having traced men's journeys towards engagement with meditation, it is beyond the scope of this paper to explore narratives of how men's engagement with meditation unfolded. Suffice to say, although meditation is an individual activity, men sometimes found themselves in networks that involved new local hegemonies for masculinity, for example around emotional intimacy. As Dalton said, 'In this community, I can be more affectionate

and more loving.' However, he was still wary about enacting such behaviours outside the community, concerned that 'if I'm too kind or loving to a man, people might think I'm gay.' Thus, any resistance to hegemonic here is qualified, in particular, assuming heteronormativity. Overall, no–one suggested that engagement with meditation networks was a universal panacea for their problems, and men still had ongoing issues to cope with. However, on the whole, most reported being better able to manage their distress, with new opportunities to redefine what it means to be a man, which Dalton described as 'very healing.'

> [Meditation] has been helping me to connect with a sense of love and affection... [Before] it didn't fit in with my idea of a man... 'Man is more of a warrior.' ... It's a work in progress, but over time I've got more and more in touch with kindness.

Discussion

This study points to a number of interesting and new ideas in relation to men, distress and well-being. First, it shows that it is possible to locate men who actively manage their well-being. This finding contrasts with research that constructs masculinity as a 'singular' and uniform category, where men are 'damaged and damage doing' (Mac an Ghaill and Haywood, 2012: 483). Further, although we did not seek to sample men who had experienced distress, many participants described significant distress and depression in their lives. At the threshold of manhood, men narrated experiences of distress linked to engagement with forms of traditional masculinity which valorised attributes like emotional suppression, and they described subsequent difficulties regulating emotions. Importantly, the results also show that it is possible for men to find alternative ways to express their masculinity and better manage emotions. Thus our results point to a capacity for resilience in men that is more akin to the hopeful 'recovery' literature in mental health (Ridge and Ziebland, 2006), than the 'masculinity as health risk' literature.

However, while other studies have found that some men are able to find constructive ways of managing their emotional problems (Emslie et al., 2006), our study is unusual in specifically focusing on how men came to do so, revealing narratives to be complex and varied, involving considerable struggle. Distress was a prominent theme, with many referring to inner emotional 'turmoil' and 'conflict.' Moreover, in retrospect some men thought they had suffered from depression, although it was interesting that men frequently understood they were struggling with life, rather than 'mental health.'

Participants' distress was linked in complex ways to traditional hegemonic masculinities. Learned emotional suppression, suggested by the gendered response framework (Addis, 2008), connected to distress in key ways, including: men losing contact with their emotions, which became a foreign territory; men finding ways to regulate emotions which were unhelpful; and difficulties in dealing constructively with emotional distress. The narratives around inauthenticity and conflict link to the 'masculine depression framework' (Pleck, 1995), where pressure to enact unattainable ideals creates internal strain.

Even if men did acknowledge their distress, most were at least initially complicit in keeping it invisible by concealing it from others, corroborating the notion of the 'masked depression framework' (Cochran and Rabinowitz, 2000). As is commonly noted in the literature (Addis and Mahalik, 2003), many men were reluctant to seek help, often due to expectations that men should be stoic. This inability to acknowledge or deal constructively with distress led to many participants trying to cope through externalising, numbing and escapist behaviours, features of theories of 'male-specific depression' (Pollack, 1998). While women's experiences of distress are more readily classed as 'depression,' distress experienced by men may be more often attributed by professionals to non-psychiatric categories, including anger (Cochran and Rabinowitz, 2000). The present study thus supports those who have called for greater gender sensitivity in recognising distress in men (Oliffe and Phillips, 2008).

Since unhelpful patterns of behaviour like emotional suppression were encouraged by traditional ideals of masculinity, moving towards more constructive ways of being was difficult because it could also mean resisting local hegemonic masculinities (Connell and Messerschmidt, 2005). However, our findings support recent studies challenging the inevitability of emotional inarticulacy linked to masculinity (Oliffe, 2005). Not only was it possible to locate men engaged constructively with their emotions, but many who described being previously unable to manage their distress found ways to do so more successfully. This affirms what social constructionist theories of gender have suggested (Paechter, 2003): that gender construction is a fluid and ongoing process; and locally, men can narrate and enact different, and more helpful, gendered performances (Brickell, 2005). Better emotional regulation was encouraged and facilitated by men's connections to 'new communities of practice' centred on meditation, where emotional intimacy was sometimes promoted as a new masculine hegemony. Our analysis thus provides support for those who have argued against any simplistic link between hegemony and negative health outcomes (e.g. Sloan et al., 2010).

There are also interesting parallels here with Fullagar's (2008: 42) analysis of women's recovery from depression, and the importance of being able to explore 'a different sense of self' through leisure activities like meditation. Moreover, that her participants' recovery also depended upon 'finding ways to better understand, live with, and manage' their emotions (p.42) reminds us that struggles around 'emotion work' are not limited to men.

Kilmartin (2005: 97) argues that men with depression should be taught about the negative impact of restrictive gender norms to help them 'resist the cultural pressure to be masculine.' The findings here suggest this advice could be usefully extended to other men who do not currently appear to be depressed, because they may experience distress related to masculine norms at some point. However, consideration must be given to potential complications generated through the way gender intersects with other identity categories, such as socio-economic status (SES) and sexuality. Although SES was not a central focus of the current study, men were from a range of backgrounds, and social and economic demands prevented some from pursuing an early interest in their interior and spiritual lives. Thus, further work is needed not only to encourage emotional engagement in men, but to understand the contextual influences. For example, while men with higher SES may fashion a 'more constructive and reflexive masculinity' as their 'greater cultural capital involves access to a wider discursive repertoire,' those with lower SES may lack the space to explore alternative ways of being male (Seale and Charteris-Black, 2008: 466).

Thus, the analysis of gender relations alone is insufficient for understanding masculinity. A similar point can be made regarding sexuality. The sample here features a relatively high number of gay participants (9 out of 30). Studies have suggested that gay people have higher rates of depression, which has been linked to the marginalization and 'censure' of homosexuality in society (Warner et al., 2004). However, such marginalization does not only impact upon gay men, but extends to qualities typically regarded as feminine, e.g. sensitivity, thus also policing heterosexual male behaviour (Schippers, 2007). Indeed, some men in the current study were wary of being emotionally expressive outside their meditation communities for fear of homophobic reprisals. Thus, examining the way doing gender intersects with other identity categories is an important way ahead for scholarship.

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Endnotes

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[i] While depression and distress are different constructs, they overlap sufficiently to be instructive for understanding men and distress (Green et al., 2010).