New ways of being a man: 'Positive' hegemonic masculinity in meditation-based communities of practice

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ABSTRACT

Connell's (1995) concept of hegemonic masculinity is often reduced to a singular construct, consisting of 'toxic' traits viewed as detrimental to wellbeing. However, the concept allows for variation in hegemony, including the possibility of forms more conducive to wellbeing. Through in-depth interviews with 30 male meditators in the UK, we explore the social dimensions of meditation practice to examine its potential implications for wellbeing. Most participants became involved with 'communities of practice' centered on meditation that promoted new local hegemonies; these included ideals experienced as conducive to wellbeing, like abstinence. However, social processes associated with hegemony, like hierarchy and marginalization, were not overturned. Moreover, participants faced challenges enacting new practices in relation to the broader system of hegemonic masculinity – outside these communities – reporting censure. Our findings are cautionary for professionals seeking to encourage wellbeing behaviors: there is potential for adaptation in men, yet complex social processes influence this change.

BACKGROUND

In academic literature, and society at large, there is a prominent discourse constructing men as 'damaged and damage doing' (Mac an Ghaill & Haywood, 2012, p.483). For example, in terms of health[1], men have higher mortality and morbidity rates on most indices (Courtenay, 2000). Accounting for these trends, it is argued that 'masculinity' itself is problematic and represents a 'risk factor' for health (Gough, 2006), as men are encouraged to demonstrate their manhood in ways seen as detrimental to health. Brannon (1976) identified prominent masculine stereotypes in Western culture, including risk-taking and demonstrating strength/toughness. Attempts by men to emulate these stereotypes – asserting their claim to masculinity by performing 'manhood acts,' like risk-taking (Schrock & Schwalbe, 2009) – can impact negatively upon health. For example, Phillips (2006, p.43) suggests risk-taking accounts for much of the 'male mortality excess' (among 15–29 year-olds in Canada, male deaths outweigh female deaths by 2.6 to 1). The identification of risk-taking with masculinity generates research titles like 'Masculinity causes speeding in young men,' which assert that 'masculinity is hazardous to health' (Mast et al., 2008, p.840).

However, this view of masculinity as 'hazardous to health' is challenged by theorizing recognizing variability among men and masculinities. Connell's (1995) theory of masculinities introduced two important ideas. First, Connell used the plural 'masculinities' to emphasize the diversity of masculine practices – not simply suggesting a 'typology' of men, but highlighting diversity *within* individual men as they strategically negotiate the varying demands of everyday situations (Connell & Messerschmidt, 2005). Eschewing static trait-like conceptions of gender, masculinities enacted by men are seen as 'configurations of practice that are accomplished in social action,' varying according to the dynamics of particular settings (p.836). Second, Connell adapted the notion of hegemony to emphasize hierarchy: within a given milieu, a particular masculine form – 'hegemonic masculinity' – is normative, with power over subordinate and marginalized masculinities through the ability to levy social penalties on men who deviate from expectations. Hegemony itself follows diverse forms, varying with locale. Connell and Messerschmidt depict a complex terrain of three 'levels' of hegemony: local ('immediate communities'); regional ('culture or the nation state');

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[1] 'Health' and 'wellbeing' are contested concepts, each containing multiple meanings (de Chavez et al., 2005). For example, both can include multiple dimensions, including physical, emotional, social and even spiritual aspects (Neilson, 1988). Thus, the terms overlap, and are often used synonymously. Reflecting these considerations, the present paper: (a) uses the terms interchangeably, albeit with a preference for 'wellbeing'; and (b) uses both as umbrella labels to encompass a range of positive functioning, i.e., physical, emotional, and/or social. Thus, any reference to improvements in 'health' should not necessarily be read as an increase in *physical* health, but may pertain to enhanced mental health, for example; the context in which the terms are used will make the specific meaning clear.

and global ('transnational arenas'). Although local levels are influenced by regional and global levels, they can develop their own specific hegemonic rules.

However, Connell and Messerschmidt (2005) suggest the theory has often been over-simplified and misused, with hegemonic masculinity reduced to a 'negative type' consisting of 'toxic practices,' with the hegemonic male being depicted as 'unemotional, independent, non-nurturing, aggressive and dispassionate' (p.840). Thus, despite the constructionist nature of the theory, depictions of hegemonic masculinity frequently still align with Brannon's stereotypes. Moreover, following the 'masculinity as risk factor' discourse, these singular depictions of hegemonic masculinity emphasise its detrimental impact upon health. For example, Gannon, Glover, and Abel (2004, p.1169) link norms like 'denial of weakness or vulnerability' to health-risk behaviors (e.g., reluctance to seek help) and concomitant poor health outcomes. However, presenting hegemonic masculinity as an assemblage of negative traits misreads the theory. First, hegemonic masculinity maintains power to some extent through 'consent and participation' by less powerful groups, rather than simply by domination; thus hegemony usually features benign aspects that may endear it to such groups (e.g., men 'providing' for their family) (Connell & Messerschmidt, 2005, p.840). More idealistically, although hegemonic masculinity is a solution to tensions within gender relations that helps to 'stablilize patriarchal power,' it is possible that forms of hegemony could emerge that are 'thoroughly "positive,"' i.e., 'open to equality with women' (p.853).

Our interest in this paper concerns the ways in which supposedly 'positive' dimensions of hegemonic masculinity might have links to narratives of health and wellbeing. Scholars suggest that local hegemonic norms may encourage practices beneficial to health. For example, Sloan, Gough, and Conner (2010), while subscribing to overarching Western norms of traditional hegemony, found men were able to position health practices as examples of attaining 'traditional' norms, like autonomy (resisting pressure to drink) or action-orientation (taking regular exercise). Only a few studies have examined less conventional norms. In one study, Duncanson (2009, p.64) found an emergent form of 'peacekeeper masculinity' in the military which challenged 'the warrior model of military masculinity' as the dominant hegemonic model. This alternative masculinity was linked to soldiers' wellbeing, as it engendered such practices as building connections with locals, thereby reducing the potential for aggressive encounters.

A useful concept for exploring how 'positive' hegemonic forms – in the specific sense here of 'conducive to health and wellbeing' – can arise in local contexts is Lave and Wenger's (1991) idea of communities of practice (CoP). CoP refer to social groupings involving 'participation in an activity system about which participants share understandings concerning what they are doing' (p.98). Wenger (1998) offers three criteria for identifying a social context as a CoP: mutual interaction of members; jointly negotiated enterprise (common purpose(s) driving the interaction); and shared repertoire (common discourses/behaviors). Theorists have explored how CoP enable the 'production,

reproduction and negotiation' of forms of gendered behavior by encouraging such behavior as a condition of participation (Paechter, 2003, p.72). Studies often emphasize the role of CoP in the maintenance of 'traditional' norms: Parker (2006, p.692) examined how the culture of a soccer team promoted an 'aggressive 'will to win,'' for example. However, Golding et al. (2008, p.254) found that the Australian 'shed' movement – 'workshop-based spaces' where men gather to undertake activities, like swapping skills – offered a 'safe space' that allowed the emergence of 'non-traditional' practices, like sharing emotions. This local context contrasted with wider regional hegemonic constructions (which discouraged 'non-traditional' practices).

The possibility that CoP might promote 'positive' hegemonic norms – conducive to wellbeing – warrants specific investigation, given that research has only examined the issue in passing. The present study examines so called 'positive hegemony' in the context of social groups formed around the practice of meditation, mainly in Buddhist meditation centers. Meditation refers to 'a family of self-regulation practices that focus on training attention and awareness in order to bring mental processes under greater voluntary control and thereby foster general mental well-being' (Walsh & Shapiro, 2006, pp.228-229). A growing body of work has linked meditation to positive health outcomes, including the alleviation of distress associated with physical and mental health problems (Grossman et al., 2004). However, most studies take a narrow psychological or physiological perspective, with minimal attention paid to social context (Dobkin & Zhao, 2011). Nevertheless, the 'religion-health connection (Ellison & Levin, 1998) gives us reason to suspect that social dimensions of meditation may be linked to wellbeing in complex ways (Koenig, 2009). For example, religious networks are considered effective at providing structural support for the cultivation of social capital, i.e., 'networks, norms, and trust' that enable collective pursuit of shared objectives (Putnam, 1995, p.664). Such support networks can have a 'buffering' effect on stress/distress (Koenig, 2009). Although many meditators practice in a secular context without reference to Buddhism, from a sociological perspective, even secular approaches to meditation reflect the way in which Buddhism has been customized for the 'West,' albeit disconnected from its antecedent roots (Phillips & Aarons, 2007). However, there has been little focus on the religion-health connection in relation to meditation. Moreover, our study is unique in exploring this connection in the context of masculinity, asking whether the social dimensions of meditation can promote 'positive' manhood acts – with implications for wellbeing – through supportive CoP.

DATA AND METHODS

Sixty interviews were conducted with 30 male meditators (each interviewed twice), producing over 82 hours of audio and more than 660,000 transcribed words. Participants were recruited in a city in the South of England using principles of maximum variation sampling (Marshall, 1996). Narratives around engagement with meditation were elicited via two semi-structured interviews (separated by at least a year, in 2009 and 2010), analyzed using a modified constant comparison approach (Strauss &

Corbin, 1998). The research question was: What are the implications of the social dimensions of meditation practice for masculine identity, particularly in terms of the way such identity affects and intersects with health and wellbeing? As such, the aim was to explore men's efforts to adopt new masculine practices which may be more conducive to health and wellbeing.

Sample Characteristics and Recruitment

Inclusion criteria were that participants be over 18 and currently practice meditation, though not as part of a clinical intervention. Recruitment was mainly through meditation centers in a city in the South of England. Of the 30 participants recruited, 22 men were recruited from one particular center (i.e., this was their main place of practice, although most also attended other centers), four men were attached principally to other center, and four men were unattached to any center. The findings presented herein are an amalgamation of data pertaining to a number of such centers. While the specific centers are not identified to preserve anonymity, they share a number of common features. All were located in urban areas, and were open to both sexes (although those with accommodation quarters only allowed men to live on site). Most centers were part of the 'Friends of the Western Buddhist Order' (recently renamed as the 'Triratna Buddhist Community'). A purposive maximum variation sampling strategy was used (Marshall, 1996), which aimed to include a wide range of socio-demographic backgrounds and life experience, as reflected in the table below. The first author met senior figures at meditation centers to gain their co-operation on the study; they acted as gatekeepers, introducing him to potential recruits, and participated themselves. Snowball sampling also occurred (men made contact on the recommendation of participants).

Sampling occurred concurrently with, and was influenced by, the emerging data analysis, which suggested the inclusion of certain men to clarify the analysis (Cutcliffe, 2005). For example, to guard against selectivity in data-gathering– e.g., only eliciting narratives presenting meditation communities in a positive light – men were sought who had chosen not to engage with such communities, to contrast their experiences with men involved with center life. As can be seen in table 1 below, the majority of participants were white and arguably middle-class (although class was not specifically determined here), a profile which Smith (2008) suggests is fairly representative of British meditators. Perhaps more striking is the relatively high proportion of homosexual participants (nearly one third of the sample): this may be reflective of the notion that, while not exempt from homophobia (Scherer, 2011), Buddhism has a tradition of acceptance of homosexuality (Schalow, 1992); as such, given the censure of homosexuality in most societies as a marginalized masculinity (Connell, 1995), homosexual participants suggested that part of the appeal of meditation-based communities was their generally open and inclusive nature, as highlighted in the results and discussion sections below. Insert table 1 about here.

Data Collection and Analysis

Interviews were semi-structured, undertaken by the first author at a location selected by participants (usually their homes or their meditation center). On average, the first interview (T1) lasted around two hours, while the follow-up interview (T2 – at least a year later) lasted around an hour. Before the T1 interview, participants gave their informed consent, and completed a demographic survey. The project was approved by the University Research Ethics Committee. An ethics protocol was in place to ensure participants' wellbeing.

Interviews aimed to elicit narratives concerning men's engagement with meditation. Narratives order events in time, and reflect how people construct and represent meanings about their lives (White, 1987). The interview approach was designed to be sensitive to men, providing a safe space for them to tell their own story in their own words. Separate interview guides for T1 and T2 were devised. T1 interviews were in two parts. The first part elicited narratives of life leading up to engagement with meditation, following on to the present. The second part focused on topics relevant to the research (if not already discussed), including health, wellbeing, and masculinity. At T2, the first part concerned narratives of the intervening year; the second part focused on the same topics of interest as T1.

Interviews were professionally transcribed. To ensure anonymity, identifying details were redacted. To introduce an element of member checking, transcripts were sent to participants for approval, which all granted. NVivo software was used to help organize and analyze the data. The data was explored using a 'modified' constant comparison approach, focusing on open and axial coding (Strauss & Corbin, 1998). Modified constant comparison follows the steps of modified grounded theory, including linking to literature to clarify the emerging analysis (Cutcliffe, 2005). However, constant comparison falls short of developing a theoretical framework, rather aiming to identify inter-relationships between key themes. In an initial coding phase, the first six T1 transcripts were examined line by line to identify emergent themes, producing around 80 prominent codes. Subsequent transcripts were searched paragraph by paragraph for additional codes, with a final figure of 105.

This paper concentrates on data pertaining to the social dimensions of meditation. Around 30 relevant codes were found, including 'emotional openness,' and 'caring.' The next stage involved the generation of a tentative conceptual framework: codes were compared with each other, and grouped into overarching categories according to conceptual similarity. For example, the two codes above produced a category of 'new ways of relating.' This framework was further developed by grouping categories into two meta-categories. 'New ways of relating was grouped with four other categories, including 'abstaining from alcohol,' to produce a meta-category of 'new ways of being a man.' The other meta-category was 'difficulties in pursuing new ways of being.' These meta-categories constitute the two main sections below. The final stage involved fleshing out the dimensions and interrelationships between these codes, categories and meta-categories. All the authors were involved in debating and developing the findings presented within, which helped to ensure academic rigour.

For example, the first and last authors were personally linked to one of the meditation centers. Reflexivity required that we acknowledge the potential for bias in our assessment of meditation. The critical input of the remaining two authors was helpful in avoiding such bias, as was a conscious attempt to use the tool of 'negative case analysis' (i.e., actively searching for themes critical of meditation).

RESULTS

Although there was considerable variation in men's experiences, we focus on common themes to highlight issues around masculinity which have broader relevance to men's wellbeing. One overarching theme emerged through our analysis: through engagement with a social 'world' around meditation, men sought to take on new ways of doing manhood. Under this broad theme, there were two interlinked themes:

- Encouraged by a meditation 'community,' most participants endeavored to take on new masculine practices which were portrayed as conducive to wellbeing, including interpersonal intimacy, abstinence, and a sense of connectedness through spirituality.

- Due to hegemonic processes, pursuing these new practices was complicated: within the community, there were issues around hierarchy and competitiveness; outside the community, men reported censure, and subsequent feelings of conflict.

New Ways of Doing Manhood

Men began meditating for diverse reasons, e.g., to cope with stress/distress (Lomas, Cartwright, Edginton, & Ridge, 2013), and many initially tried it alone at home. However, all discussed a social dimension to meditation, often through attending a meditation center. Here, men described entering an unfamiliar environment – which some called a '*meditation world*' – with new sights, sounds, ideas and behaviors: '*Initially it was a bit strange. Obviously the whole chanting thing felt very foreign. I had a quiet giggle, 'What's all these bizarre goings on!'* (Vincent). As this section elucidates, this alternative environment encouraged men to adopt fresh ideas and behaviours (intimacy, abstinence, and spirituality) that collectively constituted a new way of being a man. Moreover, as will be seen, many men suggested, either implicitly or explicitly, that these new ways were conducive to health and/or wellbeing. (Even if most men did not use the terms 'health' or 'wellbeing' per se, they did report various positive outcomes that are encompassed within these multidimensional constructs; for instance, enhanced intimacy can be regarded as a component of mental health.)

However, not all men responded positively to this new world, at least initially. William recoiled at the perceived cultural 'otherness' of his center, struggling to resist his '*antipathy*' to '*the mystery of the East*,' and found its demographic alienating ('*White middle-class, hippyish. Not my sort of background.*'). At another center, Ernest disliked how the teacher seemed pre-occupied with '*status*': '*He took great pride in sermonising… I thought, "This is all bullshit, fuck this." I brought some meditation CDs, they're much better… Organisations, they're not for me.*'

Such men did not return to the center, subsequently preferring to practice alone. Just as significantly, many men reported experiencing pressure from existing networks (e.g., peer groups) to *not* engage with these new environments, as highlighted in the second part of the results section below. However, many men were effusive about the world they found (even if such pressures meant that their involvement with these new worlds was complicated and not unproblematic.) Participants mostly turned to meditation after feeling dissatisfied with life, in the hope that meditation could improve it. Encountering this new 'world,' some recalled feeling that it could offer them something they needed. Dean recalled saying to his wife: *'Whatever that is, that kindness, that calm, I need that, that's the taste of something I'm really missing.'*

Before meditation, many participants portrayed themselves as having struggled to cope with stress/distress. The relatively positive atmosphere of their center encouraged them to keep attending and so become involved with a 'community of practice.' Terry, having come to meditation feeling '*very isolated*' following a depression, recalled: '*Acts of kindness towards me [were] so helpful in starting to bring me out of myself... I became aware [of] a whole community based around the center. I thought*, "*Maybe I can be part of that.*"'

Centers were not simply a friendly environment, but came to be seen as offering a new way of being. For men previously dissatisfied with life, and/or constricted by expectations around masculinity (e.g., that they should '*be one of the lads*'), the cultural otherness of their center was attractive, hinting at new possibilities for living. Michael recalled seeing an '*absurd*' statue of the Buddha as '*a moment of joy*' – *'[It] suggested a whole other path*, *a whole other way I'd been looking for without realizing it. Beautiful*, *mad*, *crazy and wonderful at the same time.*

For some, meditation involved following wider spiritual teachings around Buddhism, including *'ethical behavior*, *developing friendship*, *study*, *ritual*, *reflection'* (Peter). Some men identified as Buddhist, a few almost immediately (Michael recalled thinking, '*I'd been wondering all this time what I am, and I'm a Buddhist.'*). Others wrestled with the idea of identifying as such (Andrew: *'I'm into Buddhism, but I wouldn't call myself a Buddhist.'*). Yet others were appreciative of Buddhism, but did not want to be restricted by a label (Ali: '*You're putting yourself into a compartment.'*). A few, particularly those unaffiliated to a center, meditated without reference to Buddhism at all. Regardless of identity however, men involved with centers encountered an environment that encouraged them to take on new ideas and behaviors.

These ideas and behaviors fell into three broad areas: interpersonal intimacy; abstinence; and spirituality. Interpersonal intimacy had a number of interrelated facets. First, many men described becoming more emotionally open. While meditation had helped men overcome tendencies towards *inward* toughness (e.g., blunting emotions) to some extent, it was insufficient for relinquishing *outward* toughness (hiding emotions), which was often about concealing vulnerability. Thus, some

valued their center as a supportive environment which enabled them to become more comfortable sharing feelings. Steven said he never previously talked to others (*'not even to my best friend.'*) about the *'shame'* he felt around issues in his life (including experiencing depression) – '*It's only the last two years being here that I've started being able to trust people, opening up more and more... Now I can see [the shame] drifting away.*'

Various activities in their center had also encouraged them to share thoughts/feelings, including narrating life-stories, and 'confessional' meetings, where men would analyze their actions in relation to spiritual teachings. Such activities were helpful in providing structured interactions to help men overcome tendencies towards emotional concealment. Although initially resistant towards emotional intimacy ('*I don't sit in groups with men talking about my life.*'), after encouragement, John cultivated an openness he initially did not realize he lacked: '*There was definitely something opening up that I was completely unaware of. Like a plant after months of dry weather, you suddenly get some water, and it's exactly what you need.*'

Moreover, participants described learning to be more 'caring' – previously regarded as inappropriate, especially towards other men. Here participants appreciated the opportunity to allow more affection into their interactions, albeit usually only within the confines of the center. While meditation helped men connect with caring feelings, centers facilitated their expression more explicitly. For Dalton, being '*loving*' and '*affectionate*' were '*important part[s] of practice.*' He felt sufficiently trusting in his center to let these qualities '*come to the fore,*' though he was still wary about expressing these outside the center (as discussed further in the second part of the results section below). Single-sex accommodation quarters in particular, where he lived, gave him space to broaden his repertoire and take on qualities usually associated with women: '*If men and women [cohabitate], men don't take responsibility for nurturing. [Here] it's a chance to be more caring [rather than] the macho role play.*

A second nexus of new ideas/behaviors associated with center life concerned reduced alcohol and drug use. Prior to taking up meditation, many participants reported having had problematic relationships with alcohol and/or drugs, e.g., using these as maladaptive coping strategies to escape from or blunt feelings of distress. For instance, Terry felt that drug use had contributed to a breakdown he experienced prior to taking up meditation ('*[The drug] ends up exacerbating in the long term the problems that it was resolving... You get the comedown, all the paranoia… just bigger.*'). As such, most participants had been motivated – for varying reasons, and across differing time spans – to develop healthier relationships with alcohol and/or drugs. Many participants had tried to curtail their drinking and drug use; some even abstained completely, although this was difficult, particularly as it transgressed norms outside the center (see below). While men may have had various motives for desiring abstinence (e.g., health concerns), most framed it as linked to engagement with meditation. Some had become inclined to stop drinking as it interfered with practice, e.g., affecting

concentration. In this way, many experienced conflict between drinking and meditating, and more broadly, between their 'old' (i.e., existing) life, and the new way of being they were drawn to. Trying to reduce this conflict by picking 'one or the other' was one strategy: '*Mindfulness was having an integrating effect, then I'd get drunk and it would fall apart again. I realized*, "*Get drunk*, *or lead a life where things start to integrate.*"' (Sam)

Others linked their abstinence efforts to Buddhism, and its promotion of an ethical framework, including refraining from 'intoxication.' More committed Buddhists had taken vows of adherence; others interpreted ethics as idealized behaviors to be selectively followed. Nevertheless, discourses around ethics encouraged a culture of abstinence at the center, with non-drinking promoted as the norm. Even if men had not committed to abstinence, these expectations were influential, and many came to regard drinking and drug use as transgressive. For example, Jimmy told a complex tale of trying to resist drink/drugs while living in a center, yet being '*lured*' back to hedonism by old friends. Whether he resisted, or '*rebelled*' and used drink/drugs, this was still framed against the normative idea that he should abstain ('*I had a whole thing of guilt*, "*I shouldn't be doing that.*"'). For men living at their center, abstinence was more ingrained (Adam: *I feel a bit lost if I go in a pub now*, *it's just not my natural social environment.*').

In taking on new ways of being, the third main area was spirituality. Interestingly, with most participants having rejected religion (mainly Christianity) during adolescence, many were wary of spirituality. Thus meditation had appealed partly as it appeared to eschew religious discourses; teachers instead focused on '*pragmatic*' (Michael) and '*rational*' (Peter) psychological theories. Gradually, however, most men became more open to spirituality, a process fostered by two interdependent processes: cultivating anomalous experiences through meditation; and learning to articulate such experiences using 'spiritual' discourses.

First, men spoke of unusual physical-emotional experiences which were '*qualitatively different from everyday consciousness*' (Peter). Some episodes occurred in meditation itself, while others happened spontaneously in general life, though men attributed these to their practice (Alan recounted an experience of '*rapture*' while cooking – '*A wave of ecstasy*'). Other unusual experiences concerned 'religious' activities in centers, notably rituals, involving devotional acts, like bowing to a shrine. Given their prior rejection of religion, many were initially surprised to encounter such activities, and some men continued to resist (Ernest: '*It's the antithesis of what I think Buddhism is*.'). However, many came to appreciate rituals, even if they struggled to articulate why. For Grant, this ineffability was part of the appeal: '*They move me deeply*, *often to tears. I love the fact that it's something completely in another realm.*'

The second aspect opening up to spirituality was discursive: learning to interpret unusual experiences using 'spiritual' discourses. In seeking to understand such experiences, men drew on linguistic resources around them. Men unconnected or less involved with centers employed metaphors

from diverse sources, including new-age 'interconnectedness' (Harry: '*An energetic intelligent universe.*'). Men more closely linked to centers espoused Buddhist ideas (Jack discussed '*self-surrender*' towards Buddhist deities). However, some participants were skeptical about adopting spiritual discourses, especially if they had not personally had experiences that warranted such discourse. For instance, Terry reflexively queried his own statement about a '*force for good*' in the world: '*I don't know if I even mean that. I sometimes think*, "*I don't really know what I'm talking about, and I don't really believe it. I'm just trudging out something I've heard someone else say.*"' Nevertheless, nearly all participants valued the sense of opening up to a sense of spirituality through their involvement with the centers.

Influence of Hegemony on New Ways of Being

Unfortunately, as much as men valued taking on new ways of being a man – often, though not necessarily, with the encouragement of CoP – doing so was frequently challenging. There were issues linked to hegemonic processes both inside and outside centers, albeit for different reasons. Within centers, there were pressures to take on new practices; outside, there were pressures to *not* take these on.

There were three interlinked concerns reflecting the operation of hegemony in centers: hierarchy; competitiveness; and marginalization. Hierarchy was linked to the development of meditation skills and Buddhist qualities, and particularly to 'ordination': those who wished to 'commit' to Buddhism could – if deemed ready by senior members – become ordained. Hierarchy was inherent with aspiring ordinants being at different 'stages,' with the awarding of ordination generally perceived as a coveted marker of spiritual progress. Newer practitioners admired and wished to emulate more senior members – like Grant, who was ordained – who in turn understood the pitfalls of his status: '*People can idolize... You can get carried away with delusions of grandeur.*'

Notions of hierarchy and progress inherent in Buddhism promoted a proclivity for competitiveness among men (Ross: '*Men are linear, achievement, setting goals.*'). Thus, it was striking that even within settings promoting alternative constructions of masculinity, certain conventional ideas around manhood – such as competitiveness and a drive for achievement – were retained and even essentialised (i.e., seen as inevitable in men). Men admitted to ambition (Ross: '*You're given all these plans, "Do this for seven years and you'll be enlightened."*'), and desire for status, even if coveting status was '*not very PC*' (Silas), and ran counter to the 'spiritual' qualities (e.g., humility) they sought to attain (Peter: '*It's an unhelpful attitude, [but] part of me wants the badge that says, "I am big chief meditator."*'). Ambition could generate rivalry – Danny admitted '*envy*' at being '*made to wait*' while peers were ordained – which sometimes turned sour. Harry felt he had experienced '*bullying*' in the '*race to ordination,*' saying others had threatened to make life difficult if he achieved it first.

> *Human beings together are basically primitive, competitive creatures. Buddhists are just humans doing the same old bollocks the rest of us do. [They're] working towards 'an ideal,' but that's just an example of the head-fuck it is.*

Harry eventually felt compelled to leave his center, reflecting the third concern above: marginalization by *'powers that be'* in the group. Others also reported marginalization in relation to failures to attain community norms. Regarding abstinence, Jimmy – who lived in a center, but moved out, finding its idealistic *'hot-house'* atmosphere stifling – reported disapproval for his drinking. Although Ernest regarded himself as spiritual, he felt ostracized for refusing to participate in rituals, and subsequently eschewed group participation.

> *I said, 'I've come for meditation, it's early days for me to do the prayer bit'. There was a bristled feeling… One person said, 'If you're not going to stay for the [ritual], you can go.'*

Participants also reported difficulties outside their center, including censure and marginalization, in relation to new masculine practices. First, men found it difficult to pursue abstinence outside the community. While men had started meditating, other aspects of life were generally unchanged, e.g., socializing with the same friends. Thus, in attempting behavior change, one problem was that 'old' behaviors were anchored in social networks that encouraged them. Friends were often unsupportive of abstinence efforts, or at best tolerated these rather than approved (Dalton: '*They largely accepted that.*'). When participants were determined to change, they sometimes found themselves set apart from old friends: '*Socially there's been a big conflict. It's going against the stream. My social group [are] people I went to school with. They're totally in [a hedonistic] mode.*' (Andrew)

Second, while men appreciated opportunities to be more caring in centers, this contravened hegemonic expectations on men in other social settings. For example, Ernest had decided '*to be more unashamed about my emotions,*' openly expressing care towards men outside centers, though he recognized he was challenging hegemony ('*People look at me like I'm insane.*'). However, most men felt self-conscious about enacting such behaviors in non-meditation-related situations. Dalton discussed his deliberations around showing affection:

> *It's easier in the [Centre], where I feel trusting. [Outside] there's wariness, a critical voice of what other people might think, [like] if I'm too loving or kind to a man people might think I'm gay. In the community I'm quite tactile. [Outside] I'm not, because I'm not sure how people will take it.*

Third, men encountered antipathy to their burgeoning sense of spirituality. Some felt society generally was wary of activities which appeared unorthodox (Alvin: *'People [think], "He's a bit*

cuckoo, *sits there with his eyes closed and doesn't do anything."'*). Some men's families had misgivings, especially if from conventional religious backgrounds. For instance, William's Christian parents were '*perturbed*' by him turning to Buddhism ('"*Why's he praying to a Buddha*, *that's mad."... They find it embarrassing.*'). Similarly, participants had difficulties sharing their spirituality with old friends. Some men suggested that this was because spirituality was seen as somehow being at odds with conventional masculine identities. For example, Dean suggested that he had a '*blokey relationship*' with his non-meditating friends, in which there was an implicit linking of masculinity with rationality, and a concomitant disavowal of spirituality (Dean suggested that if he tried to broach the topic he could '*sense the discomfort*'). (Indeed, rationality is often constructed as a traditional masculine attribute (Ross-Smith & Kornberger, 2004), and it is noteworthy that, even though participants here had come to embrace spirituality, some justified this by presenting Buddhism as a more 'rational' form of spirituality, as highlighted above.) For some men, schisms relating to spirituality were even more serious. When William began to identify as a Buddhist, he '*avoided using the label*' among friends, portraying it like 'coming out' ('*I don't want people to think*, "*God*, *that's weird.*"'). A '*gulf*' had opened up with his best friend ('*He takes the piss out of the fact I live in a Buddhist community. He thinks it's utterly ridiculous.*'). While he tried to maintain contact with old friends, their values had diverged, and he felt increasingly alienated from them: '*[They] just talk about money*, *possessions. I always feel a bit ridiculous because I'm sitting there in the same clothes. I'm regarded as an oddity.*'

Thus, new practices that were encouraged in the meditation community were typically censured outside that community. As such, many men constructed a conflict between meditation and non-meditation 'worlds' (William: '*There's a whole non-Buddhist world out there that challenges me and my Buddhism. There's tension*, *I'm jumping between two worlds.*'). Inhabiting conflicting '*worlds*' was portrayed as painful.

> *Living between extremes*, *on one hand my deepening inner pathway*, *on the other the hedonistic lifestyle*, *partying*, *drugs. Going back and forth between these two separate ways became more and more incompatible*, *a sense of conflict. The pain became too big.* (Ross)

Using the two 'worlds' metaphor, some men tried to keep the worlds separate, some tried to integrate them, and some tried to confine themselves to the meditation one. Participants articulating the first narrative seemed to accept the worlds were incompatible, and compartmentalized them. While these men were still influenced by meditation practices in non-meditation-related contexts (e.g., being empathic), they were not 'out' as a meditator. Vincent learned to hide his interest from colleagues ('*Brash*, *bigoted, narrow-minded*') after being censured for his Buddhist bracelet (one had said '"*You're not a bloody [racist term] are you?*"').

I've never opened up to the guys. They're not of that ilk. They'd just find it bizarre. they'd think it's some sort of hippy sect! I keep that separate. I like my privacy. Work is separate to my spiritual life.

In contrast, some men tried to integrate the worlds: away from meditation-related milieus they strove for continuity, rather than keeping their interest in meditation/Buddhism hidden or implicit. For instance, Michael felt it '*important to be "out" as a Buddhist*' (note the 'coming out' theme), and use his ordained Buddhist name at work ('*Reminds me of the commitment I have made.*'). While Michael did not depict being 'out' as problematic, others found it difficult, especially mixing in circles where drink/drugs were prevalent. This made abstinence harder; men described relapses, conflicts, and divergences from friends: '*I'd be going on retreats. They were like, "Cool, whatever." They're just not that interested. Slowly I'm seeing them less and less.*' (Andrew)

Since many participants found it hard to pursue new ways of being in the non-meditation 'world,' some reduced their contact with this world, inhabiting their meditation center as far as possible. With opportunities to live and work in such centers, it offered a self-contained world, with the possibility of structuring one's whole life around it. Danny portrayed his center as a '*secure bubble*' keeping the outside world at bay. However, even immersion in this world did not prevent the 'outside' world impinging upon it, causing conflicts. Some men still worked or socialized outside their center, forcing them to negotiate the busy city, which Danny found '*jarring.*' Relationships also generated conflict, especially for heterosexual men, since female partners were barred from the single-sex living quarters: '*I moved into a community, [but] started to go nuts because I had a girlfriend, and the two parts of my life started to diverge, I started to feel a bit split*' (Adam). Thus, even men who embraced the meditation world as much as possible were unable to live a life uncontaminated by division and tension.

DISCUSSION

This study provides a detailed examination of 'positive' hegemonic masculinity, in the specific sense of the potential for health and wellbeing promotion. Within a restricted milieu – a community of practice (CoP) at a meditation center – men explored ways of doing manhood that were discouraged in the wider culture, including interpersonal intimacy and abstinence. However, we do not use the qualifier 'positive' uncritically, as taking on new ways of doing manhood was problematic, both inside and outside the CoP. The CoP did not dismantle masculine hegemony; rather a new system came into being, including competitiveness between men, showing how local hegemony still involves hierarchy and marginalization. Thus, while the norms were ostensibly positive, some men were adversely affected by them. Furthermore, such norms were not 'thoroughly positive' in Connell and Messerschmidt's sense (2005), as they still upheld a patriarchal system which denied equality to women (e.g., men generally occupied positions of power). Moreover, the new hegemony did not

translate outside the CoP, where the wider regional system of hegemonic masculinity was still dominated by traditional norms, creating censure, ostracism and conflict. These findings are both hopeful (it is possible for men to enact more helpful constructions of masculinity), yet limited: although hegemony can have positive dimensions – in this case, supporting health and wellbeing – this process is complex. Local hegemonies that appear positive at first glance are not entirely positive on deeper examination.

Studies exploring CoP in relation to masculinity usually focus on the maintenance of traditional norms (Parker, 2006). Our study shows that CoP can promote alternative norms, like emotional openness, that potentially facilitate wellbeing, with implications for Connell's (1995) theory. Golding et al. (2008) argued that hegemony is not inevitably negative. Our study goes further, suggesting hegemonic masculinity can be 'health positive.' This is a useful corrective to how hegemony is often presented, i.e., 'reduced to a singular [negative] construct' (Gough, 2006, p.2477). The idea of 'positive' hegemony is not unprecedented: Duncanson (2009) identified a 'peacekeeping' hegemonic form in the UK military. However, our study is the first to explore positive hegemony specifically in relation to health/wellbeing, which appeared to be facilitated by the masculine practices promoted by the meditation-based CoP. For instance, alcohol use – a way for men to embody traditional hegemonic norms (De Visser, Smith, & McDonnell, 2009) – is an issue for men, who account for two thirds of alcohol deaths in the UK (ONS, 2012). However, despite 'calls to action' to reduce men's alcohol use, a 10 year review concluded little progress had been made (Robertson & Williamson, 2005). Thus, the link here between meditation groups and abstinence is intriguing, and warrants further investigation. Likewise, influenced by traditional norms of 'invulnerability,' men are seen as having smaller support networks than women, which impacts upon their coping abilities (Courtenay 2000). However, by connecting with others in the CoP, many men here felt supported when in distress, corroborating the 'religion-health connection' (Ellison & Levin, 1998), where religious participation can potentially 'buffer' against stress (Koenig, 2009). Moreover, men valued the emotional qualities promoted by their CoP (e.g., empathy). While the notion that being kind can generate wellbeing – for the recipient and the giver – is not new (Seligman & Csikszentmihalyi, 2000), it is striking to find it promoted as a local hegemony among men.

However, although we found an alternative local system of masculine hegemony with positive implications for wellbeing, this hegemony also had less helpful implications for men. These new norms were still subject to social processes linked to traditional hegemonic forms – e.g., marginalization of men who fail to measure up (Connell, 1995) – albeit targeted here toward phenomena like failure to participate in rituals or pursue abstinence. Thus positive hegemony is also liable to hierarchy: those who appear closer to normative standards within a CoP could have power over those who do not. Issues of power inequalities and concomitant potential for abuse in religious communities are noted in the literature, particularly around 'guru-disciple' relationships (Puttick,

1995). Perhaps because accusations of impropriety have previously been leveled against Buddhist movements (Bunting, 1997), CoP tended to discourage such 'guru-disciple' bonds. Nevertheless, a hierarchy emerged, especially around ordination, which channeled 'progress' into a structural stage-wise process, generating rivalries. Thus, while status-seeking and competitiveness are traditional hegemonic norms, they are also mechanisms by which hegemony operates (Connell, 1995), so it is unsurprising to observe such traits in relation to 'non-traditional' norms. Status and power do not cease to be important to men in religious settings that challenge traditional masculine constructions – including gay/lesbian Christian communities (Sumerau, 2011) – which should be expected given that manhood acts are inherently aimed at 'claiming privilege, eliciting deference, and resisting exploitation' (Schrock and Schwalbe 2009). On this note, it is striking that women were largely absent from men's narratives, and while the meditation centers were open to both sexes, these places still upheld systems of male power (e.g., accommodation quarters on-site were frequently male-only). Thus even local hegemonies promoting ostensibly 'feminine' norms, like emotional engagement, may still 'stablilize patriarchal power' (Connell and Messerschmidt, 2005, p.853).

Efforts to enact new ways of being were also hampered by hegemonic pressures outside the CoP, where traditional norms still dominated (e.g., emotional expression was discouraged). Connell and Messerschmidt (2005, p.850) suggest that although local forms of hegemony are influenced by wider regional forms, the latter do not 'wholly determine' these local forms. Our findings go further, showing that local forms can depart radically from the wider hegemony (even though they may retain some features, like competitiveness). Thus the local and the regional can exist in a state of tension and opposition. Indeed, such discrepancy between local and regional hegemonic forms here was perhaps what *drew* some men to these CoP. For example, homosexuality is censured by traditional hegemony (Connell, 1995); many gay participants here were attracted to Buddhist CoP precisely because these offered acceptance, and refuge from homophobic discrimination. The contrast between the CoP and wider society was such that men distinguished between meditation and non-meditation 'worlds.' Thus, despite the attractions of the 'meditation world,' having to traverse these two worlds was a source of difficulty for men. Such findings highlight the limited reach and power of alternative local hegemonies operant in small CoP such as meditation-centers: as valuable as these alternative systems were, outside the boundaries of the CoP, participants struggled to champion or even just enact the 'new ways of being' that they were able to explore within the CoP.

This finding concerning participants' experiences of conflicting 'worlds' – i.e., CoP with 'positive' masculine norms nestled within a wider culture that upholds more traditional constructions of manhood – furthers our understanding of how masculinity is constructed in context. As Wenger (1998, p.648) noted, the 'continuous negotiation of 'self' across multiple social contexts' can generate identity conflict. However, there was variation in how men responded to the challenges of negotiating different 'worlds.' Some men kept the worlds separate, 'compartmentalizing' the identities that

emerged in each. Others tried to maintain a consistent identity across different contexts. However, many felt an on-going sense of conflict, wanting to enact 'new ways of being' outside the CoP, but worrying about doing so. Those who felt conflicted had a difficult choice. One option was maintaining new behaviors outside the CoP, risking censure. Some even likened admitting to being spiritual to 'coming out' as gay. Such prohibitive social barriers around meditation have not been explored previously. An alternative option was to adapt to traditional hegemony outside CoP, e.g., engaging in 'laddish' banter at work. There are parallels with Gough (2001, p.181), who found that men withheld non-hegemonic discourses over concern with the 'social costs entailed in appearing 'other.'' However, some in our study who modified their behavior felt they had compromised their authenticity by doing so. Thus both responses above were problematic, risking either censure or inauthenticity. There were two ways men tried to 'close down' this dilemma: relinquishing non-traditional behaviors and embracing old ways (e.g. drinking), or immersing themselves in the CoP, avoiding contexts with traditional norms (cf. Phillips & Aarons, 2007). Neither solution was easy: all men negotiated on-going strategies and compromises to manage contexts with differing expectations on them.

Thus while narratives here highlight difficulties of trying to take on more constructive behaviors, they also make a wider point about doing gender. The results affirm Connell and Messerschmidt's (2005, p.837) argument that men do not simply enact a masculine role, but move within and between contested categories of masculinity, demonstrating 'complex relations of attachment and resistance to those categories.' However, this study reveals how troubling adaptation can be. Invoking psychodynamic theory, Connell and Messerschmidt saw men as comprising multiple discourses and 'layers' of masculinity, with 'tension and contradiction' between these. Our results suggest this 'tension' may be experienced reasonably consciously and painfully by men themselves. Constructionist theories like Connell's have been criticized for 'overly-sociological' views of identity, excluding men's subjectivities (Whitehead, 2002). Exploring men's 'inner world,' our study highlights how efforts to take on more helpful masculine behaviors can be undermined by hegemony and social context. Encouraging men to change, even with the help of CoP, has its limitations. As such, wider social changes in how masculinity is constructed must still be encouraged, for example encouraging emotional openness among men generally.

Limitations of the research mean caution is needed in generalizing the findings. For example, despite an objective of maximum variation sampling, men here are unrepresentative of the general population, including a high proportion of gay men (nine of 30). Given the censure of homosexuality in society as a marginalized masculinity, it is possible that gay men – and heterosexuals who display qualities seen as feminine, which are also policed by censure (Connell, 1995) – were especially drawn to an inclusive community, as discussed above. However, the relatively unique nature of this sample is useful precisely because it indicates where future research should be directed, i.e., how to

encourage practices identified here as conducive to wellbeing in men *not* represented in the sample. For example, most men had a relatively high socio-economic status. In contrast, men from disadvantaged backgrounds may lack hegemonic power and have less access to opportunities to explore alternate masculinities (Seale & Charteris-Black, 2008). Thus, while it is encouraging that the CoP here promoted 'positive' hegemonic norms, the value of such groups are limited if they are only accessible to select men. Future work might explore barriers that hinder some men from developing and joining such networks, and find ways to encourage participation.

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Table 1: Sociodemographic characteristics of the sample of 30 male meditators

Age

Years	20 – 30	30 – 40	40 – 50	50 – 60	60 +
Participants	4	7	14	4	1

Meditation experience

No. of years	0 – 5	5 – 10	10 – 15	15 – 20	20 +
Participants	7	8	7	4	4

Ethnicity

Category	White British	Mixed British	White other	Indian	Asian
Participants	21	1	6	1	1

Occupation

Category	Health	Community	Business	Education	Other
Participants	9	5	5	3	8

Education

Level	Secondary	College	University	Post-grad	Professional
Participants	2	2	8	6	12

Relationships

Status	Single	Partnered	Family
Participants	13	11	6

Sexuality

Status	Homosexual	Heterosexual
Participants	9	21