Food assessment: a discursive analysis of diet talk in interviews with older men who are obese

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Abstract

Objective: Obesity rates are increasing faster in men than in women, with particular concerns raised regarding older men. However, men are less likely than women to engage in weight-loss activities such as dieting, typically constructed as a feminine practice. Previous research has argued that men's food consumption is notably different and unhealthier than women's. The novel contribution of this article is an analysis of food assessments in order to explore how older men (mostly) undergoing weight management programmes make sense of changes in their nutritional intake.

Design: Semi-structured interviews were conducted with 30 men who were obese, 27 of whom were engaged in weight loss programmes. Discursive psychology was employed to analyse the data.

Results: In contrast to other research, participants constructed nutritional advice as enlightening. Participants worked up 'ownership' and pleasure assessments to certain food choices which they contrasted with new, healthier, eating practices. Moreover, healthy food was constructed as acceptable.

Conclusion: Our study contributes new insights about how nutritional advice impacts upon preconceived (mis)understandings of healthy eating practices. During the interviews, men positioned themselves as educators – health promoters might usefully develop nutritional advice in collaboration with men who have successfully changed their diets for optimum effect.

Introduction

Obesity is a growing concern in Western societies with links made to health issues including type 2 diabetes, coronary heart disease, arthritis, hypertension, and some forms of cancer. Indeed, biomedical research claims that obesity has increased morbidity and mortality and that health care costs are rising as a consequence, making this an economic problem (WHO, 2006). While there are a number of criticisms about the so called 'obesity epidemic' (Campos, 2004; Gard & Wright, 2005; Monaghan, 2005, 2007a, 2007b; O'Hara & Gregg, 2012), one consequence of this discourse has been a push towards individual responsibility to tackle weight gain (Gracia-Arnaiz, 2010). The Body Mass Index (BMI) defines healthy or pathological weight levels in relation to an individual's height (for obesity the number is 30 and above) (Nuttal, 2015). Based on BMI, more men than women are overweight or obese in the UK, and it is estimated that in England by 2025 that 47% of men and 36% of women will be overweight (Archibald et al., 2015; Butland et al., 2007). Furthermore, obesity rates are increasing faster in men than in women (Men's Health Forum, 2005). Overweight older men (men over 50) are a particular concern for health reasons (NICE, 2014).

Previous research has argued that men are less likely to perceive that they are overweight (Kuchler & Varium, 2003), while other research has suggested that men do realise that they are overweight (Wardle & Johnson, 2002). In either case, men are less likely to engage in weight-loss activities such as dieting (Robertson et al. 2014; Wardle & Johnson, 2002; Young, Morgan, Plotikoff, Callister & Collins, 2012). Despite these gendered differences, there is limited research about the dieting practices of men in comparison to women, and also limited understanding of the sense-making practises which men engage with when they do attempt to make health/weight related or dietary changes (Lewis, Thomas, Hyde, Castle &

Komesaroff, 2011; O'Brien, Hunt & Hart, 2009). How, for instance, do men evaluate food after making dietary changes?

In this paper a discursive approach is employed to consider how food is evaluated within research interviews with mostly older men who are categorised as obese in the UK. Our approach focuses on the way that food assessments are produced and what they might achieve for participants during discussions of weight loss interventions (Wiggins & Potter, 2003). This new knowledge will be useful to those designing weight loss programmes for men.

Men's reluctance to engage in healthy eating

Across Western countries, men's food consumption is notably different and unhealthier than women's. For example, women eat more fibre, fruit and vegetables in comparison to men who consume more red meat, eggs, alcohol, and high sucrose foods (Caperchoine et al., 2012; Kiefer, Rathmanner & Kunze, 2005; Rothgrebber, 2012; Sabinsky, Toft, Raben & Holm, 2007; Wardle, Hasse, Steptoe, Nillapun, Jonwutiwes & Bellisle, 2004). Men also make distinctions between 'tasteless' healthy foods (such as vegetarian and salad) and 'tasty' traditional foods such as red meat (Gough & Conner, 2006). There are, of course, exceptions to this, for example, men who engage in 'clean eating' (Spencer, 2014) but the majority of research continues to present men as reluctant to engage in healthy eating.

It has been argued that such differences in diet can be linked to the way that men and women ascribe different meanings to food and eating (Cavazza, Guidetti & Butera, 2015; Mróz, Chapman, Oliffe & Bottorff, 2011; Sobal, 2005). For example, unhealthy eating behaviours are embraced as 'manly' in contrast to healthier choices such as vegetarianism and home

cooking which are attributed as feminine (Stibbe, 2004; Kildale & Syse, 2017). In addition, heterosexual men typically refrain from engaging in food choice, procurement and cooking, believing this is a woman's sphere (Newcombe, McCarthy, Cronin & McCarthy, 2012; Gough, 2007). When men do engage in cooking food, they present this as different to the male norm, yet they simultaneously still retain 'masculine' elements of their identities through marking out their individuality or (hetero)sexual allure as a consequence of their culinary efforts (Szabo, 2014).

Normative pressure from male peers may also impact on unhealthy food choices, and to a certain degree this is to conform to masculine expectations (Newcombe et al., 2012). For example, red meat consumption is viewed as a sign of strength and virility (Kildale & Syse, 2017; Rozin, Hormes, Faith & Wansink, 2012; Rothgerber, 2013; Vartanian, 2015). Men's decisions about food intake are also influenced by discourses such as the notion of food as fuel in comparison to more hedonistic choices which may be limited to special occasions (Newcombe et al., 2012). In a Norwegian study of carpenters, drivers and engineers, eating was similarly discussed as functional and traditional with 'good' foods saved for the weekend (Roos & Wndel, 2005). However, there were class-based differences – engineers discussed aspects of taste and meaning more than carpenters and drivers who constructed food in terms of fuel for work (Roos & Wndel, 2005).

It may be argued that men do not understand what healthy eating constitutes, but a study conducted with Canadian men who live alone (notably relatively high social class) found that this was not the case. However, the personal food intake of men in this study did not adhere to healthy foods despite presenting themselves as having better eating habits than stereotypes of bachelors (Sellaeg, & Chapman, 2008). Barriers to healthy eating, and dieting, include a

critical stance on promotions of healthy eating due to inconsistent messages and a construction of themselves as still healthy (Gough & Conner, 2006; Delaney & McCarthy, 2014). Furthermore, healthy eating is associated with being insubstantial, monotonous and unsatisfactory (Gough & Conner, 2006; Delaney & McCarthy, 2014).

Resisting 'feminised' notions of dieting

Engagement in dieting for weight loss is typically constructed as a feminine practice which may explain men's reluctance to diet (Gough, 2007; Rowlands & Gough, 2017). It is argued that when men diet they do so for different reasons than women. It is thus worth considering what prompts men to try to lose weight. One UK study found that heterosexual men legitimised their decisions to diet due to health as opposed to appearance, which was considered a feminine response (De Souza & Cicltira, 2005). Similarly, a study based in Denmark also found that health, in contrast to appearance, was cited as a reason to lose weight (Sabinsky, Toft, Raben & Holm, 2007). However, in addition to health concerns, a study of 36, highly educated, white Australian men found that men ignored the health implications of their weight, or were in denial about it, thus delayed action to lose weight and were only prompted to consider weight loss due to life events such as fatherhood, and also their appearance (Lewis, Thomas, Hyde, Castle, & Komesaroff, 2011). Thus, while there is evidence that highlights women report body dissatisfaction more frequently than men, more recently this pattern is changing with more UK men being concerned about their appearance (authors; Grogan, 2017). However, concerns about appearance tend to be in line with ideals for men's bodies. Thus physical activity, rather than dieting, may be the main choice for weight loss with a preference for being athletic or muscular (Lewis, Thomas, Hyde, Castle, & Komesaroff, 2011). Being informed of BMI measures may encourage men to take weight loss action (Donnachie, Wyke & Hunt, 2018; Robertson et al., 2014). However, men may feel

embarrassed, or ashamed and even nervous about confirming their overweight status (Donnachie et al., 2018).

Dieting and masculinity

Dieting itself can be viewed by others as detrimental to the socially constructed ideas of masculinity (Rowlands & Gough, 2017). A focus group study with 59 Scottish men identified that heavy drinking, synonymous with masculine behaviour, meant that men who reduced their alcohol consumption for weight loss were subject to considerable pressure from peers to abandon their new status as lighter drinkers (O'Brien, Hunt & Hart, 2009). Similar challenges were met by those men who dieted – they reported being often ridiculed for doing so, their diets viewed as feminine. Those men who practiced healthy behaviours were viewed as too invested in their appearance, with the exception of football or running which involved competition with other men which was deemed sufficiently masculine. In addition, an Australian study found that middle class men's diets were reported to be similarly sabotaged by other male peers, plus their mothers who wanted to cook for them (Mallyon, Holmes, Covenay & Zadoroznyj, 2010).

Despite these pressures to conform to masculine ideals, O'Brien et al. (2009) found that some focus groups conducted with an Asian Men's group, a Gay Men's Group, a Prostate Cancer Group, a GPs Group, and a Firefighter's Group were more encouraging in that they had a more open approach to health and diet. The Firefighter group in particular swapped recipes and compared physical activities they employed to maintain fitness albeit with some critique from other firefighters. Firefighters may arguable have secured enough 'masculine capitol' (de Visser, Smith, & McDonnell, 2009) which negates the majority of criticism of being un-

masculine. A further example of this capitol is associated with men who engage in 'eating clean' diets due to their involvement in mixed marital arts (Spencer, 2014).

The evidence suggests that there is some hope for changing men's dietary practices. In particular, for those men who are able to critique, or renegotiate, traditional 'macho' identities. The way that diets are framed might influence the uptake by men. For example, in a weight loss intervention study aimed specifically at overweight Australian men at university (Collins, Morgan, Warren, Luans & Callister, 2010), participants were provided minimal advice on diet and exercise. Certain aspects of the men's diets improved such as reduced portion size and less consumption of high-fat foods and fruit juice. Notably though, men in this study did not decrease their alcohol consumption, switch to higher fibre bread, or reduce their consumption of low fat dairy products, or increase their consumption of vegetables (Collins, Morgan, Warren, Luans & Callister, 2010). Designing weight loss interventions specifically aimed at men may help change some unhealthier aspects of men's diets.

Objective

The above research has made some impact into our understanding of men's food consumption and in understanding why dieting is potentially problematic for men. However, there is insufficient research into older men's eating and dieting practices (Mróz et al., 2011), or male-specific research on healthy eating (Caperchoine et al., 2012). The limited research that exists suggests that older men have more positive perceptions of healthy eating yet are lacking in knowledge (Drummond & Smith, 2006). Furthermore, there is an identifiable gap in the research as to what nutritional advice works for men (Caperchoine et al., 2012; Collins et al., 2010). Therefore, the current study examines how eating practices and diet talk are constructed and made sense of in interviews with mostly older men who are categorised as obese. The novel contribution of this article is a focus on food assessments in order to explore how men undergoing weight management programmes make sense of changes in their nutritional intake. As noted by Wiggins & Potter (2003), food assessments perform interactional business in the context in which they are produced. This notion is expanded below in the method section.

Method

Participants and data

Our study involved 30 semi-structured interviews with men who were obese, 27 of whom were engaged in two UK weight management programmes, the remaining 3 were not linked to any weight loss intervention at the time of interviewing. The data are part of an evaluation project which considered the efficacy of weight loss programmes. Participants were recruited by the third researcher (third author), who attended multiple sessions at two weight management programmes: an established commercial group (Slimming World) and a healthservice funded "male friendly" scheme (Motivate). Slimming World is an established, dietbased programme, which holds weekly meetings for anybody wanting to lose weight, typically paid for by attendees (of all genders) with certain exceptions for those who have been referred by medics. Motivate was designed to appeal men (restricted to those with a BMI greater than 25) yet women were also later encouraged to join due to a lower male attendance than anticipated. Motivate ran a 45 minute plenary about healthy eating, and additionally a 45 minute physical activity session over a 12 weeks (with the chance of continuing if 5% of body fat was lost). Those recruited were 10 men from Slimming World, 14 men from Motivate, three who attended both weight loss programmes, and a further three men who attended neither (recruited via advertising the project). Due to the delicacy of the topic, we did not formally ask participants what their weight was but men typically disclosed

their BMI and these were over 30 thus falling into the obese classification. Every effort was made to engage men from Black and ethnic minority backgrounds so that their experiences were not excluded, however, most participants were White British/Irish with two men identifying as Black British and one as Portuguese. Participants were equally divided in terms of occupational backgrounds of working class and middle-class. The age range of participants was 30-69, with a mean of 52. All interviews were conducted by the third author.

The research project was approved by the relevant University Ethics committee. Interviews took place in participant's homes or in a quiet room at the university, according to their preferences. Participants were given the opportunity to ask any questions about the study and were informed of their right to withdraw at any point. The interview approach enabled us to explore a range of issues such as: discussions about weight increase; what being obese meant to them; why they decided to enrol on a programme of weight loss; their experience of losing weight; body image and health issues; and diet. Interviews lasted 72 minutes on average (range: 35-127). Elsewhere we have discussed issues related to body dissatisfaction, appearance and wellbeing (authors), in this paper our attention is on dieting and food appraisal.

Analytic approach

Discursive psychology (Edwards & Potter, 2001; Hepburn & Wiggins, 2005; Wiggins, 2017) was employed to analyse the data. In this approach social interaction is viewed as part of social practice, rather than treating talk and text as a transparent medium. Core principles of this approach are first that discourse is considered as a primary site where actions are done (i.e. that talk achieves things). Second, that talk is situated in three ways – either sequentially

(in that prior utterances are consequential for what is produced in the next utterance such that they set up what comes next); that institutional identities influence forms of interaction (here the identities of researcher and participant in an interview about weight loss); and rhetorically in the way that descriptions can be examined to explore relevant alternatives. Finally, discursive psychology treats talk as both constructed, using a range of discursive resources, and constructive as they build up different versions of reality (Hepburn & Wiggins, 2005).

Discursive psychologists typically prefer to work with naturalistic data in contrast to researcher-generated data such as the interview interactions that we focus on here (Potter & Hepburn, 2005). The benefit of naturalistic data is that topics are not thrust upon participants but analysis focuses on issues that are relevant to participants at that particular time (Hutchby & Wooffitt, 1998). In contrast, data produced from interview studies are a product of the research setting which are set up with concerns that are central to the researcher (Potter & Hepburn, 2005). Although the interview situation is obviously far removed from the casual way that food assessments are worked up in ordinary conversations, they do offer one site where accountability for diets is made visible. Moreover, access to naturalistic data of older men evaluating food is fairly hard to access. To mitigate concerns, our analysis considers the context of the interview – specifically that weight loss and food intake are issues where accountability is a key aspect for participants and, as such, they may attend to this in responses to the interviewer's constructions in order to consider the type of responses interview questions set up.

All interviews were transcribed verbatim; with data extracts shown in the analysis transcribed using the Jefferson transcription symbols (see Appendix) to convey how they were delivered. Analytic stages followed those outlined by Wiggins (2017) and included the first three authors reading the data and coding the transcripts individually to examine the interaction in terms of social actions and psychological constructs. This means that our interest is the ways that psychological constructs (for example, food preference) are made relevant within the research interviews – what actions are being performed and what psychological business is being managed at particular points in the conversation (Wiggins, 2017). Wiggins and Potter (2003) outline distinctions between two classes of evaluative food assessments: subjective versus objective, and category versus item. They argue that subjective food evaluations (e.g. love, detest) may index an individual preference/dislike whereas objective evaluations index the quality of the object (e.g. tasty, bland). Food assessments can refer to a category of food (e.g. cakes) or specific food (e.g. this cupcake). Such distinctions become relevant in analysis as they 'can manage the implications for co-conversationalists of evaluation' (Wiggins & Potter, 2003, p.526). In our data such distinctions can mark out issues such as accountability for weight loss.

Codes were then compared and verified. At this stage the emphasis was on how participants constructed food and diets. From here, a large corpus of instances where food assessments occurred were collected. Our analytic interest was in how participants (the interviewer and each participant) attended to changes in diet and how these were co-constructed. Rigour was achieved through grounding the analysis in the sequential unfolding of the interaction. The concept of next-turn proof procedure effectively enables the analyst to check that any interpretation of the data is not based on their assumptions. Focus is switched to how

participants themselves orient to a turn of talk, effectively how speakers display in their next turn how they have understood a previous utterance (Wiggins, 2017).

Results

Interviews with men who are overweight and obese provide an opportunity to discuss a range of issues. In this paper we focus on how men in our study made assessments about food and eating practices. In particular, our analysis focuses on: how men display a raised awareness in assessing healthy/unhealthy food post attendance at weight loss programmes; how pre-diet food is assessed; and how new food regimes are constructed. Data extracts are labelled with the interview number, participant's pseudonym, and reference to how they were recruited (Motivate, Slimming World, or NON to represent those who did not attend a weight loss programme); the interviewer is referred to by his name, (third author).

Raised awareness: assessing pre-diet food choices

The participants who attended Motivate or Slimming World were given nutritional advice at meetings they attended. Many of the participants positioned themselves as having a good level of knowledge about unhealthy and healthy food. However, for a large number of participants these sessions were constructed as raising their awareness levels with regards to such assessments:

Extract 1: Interview 8 with John, Motivate

1	Chis	an::d how's it gone so far have you-
2	John	it's been great (.) I th <u>i:nk</u> (.) a lot of it \uparrow (.) is common
3		sense
4	Chris	yeah.
5	John	but that's not a sense that's very common
6	Chris	hh.
7	John	cos:s (.).hhh some stuff like there was one week where we talked
8		about fats and sugars and (.) Elaine the girl was talking on
9		all about all these sugars and different thing so=
10	Chris	=the nutritionist?
11	John	yeah the nutritionist so I was thinking oh I can have
12		a bottle of Oasis drink (.) it's not too bad it's not fizzy,
13		there's only 130 calories in it it's not that bad
14	Chris	yeah

15	John	there's <u>12</u> teaspoons of sugar in it
16	Chris	yeah
17	John	so straightaway I'm like <u>bloomin' Nora</u>
18	Chris	yeah [yeah
19	John	[I did not know that so <u>tha::t</u> and there was a couple of
20		other things that couple of $\overline{\mathrm{us}\ \mathrm{guys}}$ all commented on .hh erm
21		(.)so that that's been really good
22	Chris	yeah.
23	John	really challenged me on the food front different things to
24		<u>eat</u> different ways to eat
25	Chris	yeah.
26	John	>erm smaller plate take your time< smaller portions everything
27		like that erm and I found the exercise gre:at
28	Chris	yeah

In line 2 of extract 1 above, John initially responds to Chris's broad request about how the nutritional sessions have gone with a positive assessment of them. However, John then extends his turn by constructing the nutritional advice as 'a lot of $it^{\uparrow}(.)$ is common sense' before producing the humorous comment (evidenced by Chris', the interviewer, laughter particle in line 6) about that sense as not being very common. Hearably then, John positions the advice as newsworthy. Indeed, the narrative of internal thought process that follows (lines 8-9; 11-13; 15) displays a mistaken understanding of a particular drink item as a healthy option produced using the three-part list of 'it's not too bad it's not fizzy there's only 130 calories in it' (Jefferson, 1990). The receipt of this new knowledge about the amount of sugar in an Oasis soft drink is delivered as a shock as evidenced by the 'bloomin' Nora' response (a vulgar British expression of surprise) and a declaration that he was unaware of this. Sugar content in a range of drinks was referenced by a number of participants across the data, and here John notes 'that a couple of us guys' commented on such revelations, working up the news as not simply new to him. He thus constructs the nutritional advice as 'really good' (line 21) and that it 'really challenged me' (line 23). The challenge, as worked up by John, is about different food choices and ways of eating them. To illustrate this, John lists (Jefferson, 1990) '>erm smaller plate take your time< smaller portions everything like that', effectively demonstrating how he understands this new advice. John's talk constructs a shared learning

about nutrition which he has applied to his own diet, potentially suggesting that some men do

not construct themselves as disinterested in dieting as previous research suggests.

Within the interviews, the participants routinely displayed their new found knowledge as John does above:

Extract 2: Interview 21 with Jason, Slimming World 1 Jason but there's certain ingredients (.) I mean it's like it (.) 2 it it's being awa:re (.) you use extra lean mince or lean mince 3 if you can't get it whereas before you just go in and buy the 4 cheapest mince you could lines omitted 5 Jason so so it's taught you it's taught you you can 'ave you can 6 'ave what you like 7 Chris yeah 8 Jason but in moderation 9 Chris yeah lines omitted as soon as you cook fru:it (.) it's no it's not syn free 10 Jason 11 anymore 12 Chris really↑ (.)right Jason because it concentrates the sugars 13 14 Chris ri::ght lines omitted 15 Chris yeah yeah so so what is it you've done then you've cut certain things out by the sounds of it? 16 17 Jason yeah (.) I've cut obviously cut the bread out 17 Chris yeah Jason I've cut the pastry out (.) erm I've (.) with all intents and 18 19 purposes I've cut the cake out 20 Chris yeah Jason because I love me cakes 21 22 Chris yeah 23 Jason erm 24 Jason Chris and how's that been 25 fine because I've just substituted them for something else lines omitted 26 Chris so so what's (.) what's the difference now then 27 why why how how how have you been able to just (.) to not to 28 not-29 because because it's in me head now Jason 30 Chris right 31 it's it's all about (.) it's trying to quote what it says in Jason 32 the book and that's [wrong but it's it's food optimising 33 Chris [it's fine that's what I've learnt from the book 34 Jason 35 Chris veah lines omitted 36 Jason but eat the right things until you're full yeah so if 37 Chris 38 Jason it's brainwashed me that I think that's the word 39 Chis hah hah

In the extract 2 Jason is responding to the interviewer's question about why Slimming World is successful for him which Jason uses as an opportunity to construct a raised awareness of food based on Slimming World nutritional advice. Lines have been omitted where Jason constructs in-depth lessons he has learnt from Slimming World such as how he is 'more aware' now about what is in food such as the categories of cooked fruit, shop bought grated cheese, concentrated orange juice, and rice amongst many examples. He also spends time constructing previous eating practices, for example, if he bought a packet of biscuits he would eat them all. Of relevance to our current focus, is how he generically (using the footing 'you') constructs the nutritional advice as 'being awa:re' (line 2) of aspects of certain food items (here lean meat whereas before this would have been 'the cheapest mince'). Lines 5-8 also orient to a key message in Slimming World about eating 'what you like' but 'in moderation'. The lessons learnt are delivered in an educational tone. For example, "as soon as you cook fru:it (.) it's not syn free anymore" (foods that are high in calories such as biscuits, sweets and alcohol are referred to as 'syns' in Slimming World) which work up his authority in delivering the nutritional advice to the interviewer/Chris. Chris' receipt of this with a surprise token 'really \uparrow ', displays that he treats this as a noteworthy and new to him (Sacks et al., 1974).

In line 15 Chris seeks clarification about the process of dieting and formulates a candidate summary 'you've cut certain things out by the sounds of it?'. Jason receives this affirmatively and adds 'I've cut obviously cut the bread out' (line17). The use of 'obviously' associated with this category of food marks bread out as constituting a 'syn', to which Chris simply responds with 'yeah'. Jason also constructs that he has 'cut the pastry out' and finishes 'with all intents and purposes I've cut the <u>cake</u> out' (note the 'me' prefaced in line 21 which we

discuss later). Thus Jason constructs cutting out cake as virtually achieved yet the 'me' preface "because I love me cakes" marks (or claims ownership) cakes out as a difficult category to cut.

After a discussion of a lapse of eating some cake at Christmas (in lines omitted), Chris asks 'and how's that been' which requires an assessment. Jason's response assesses this as 'fine because I've just substituted them for something else'. Chris later pursues what is 'the difference now then why why how how have you been able to just (.) to not to not -' potentially setting up the opportunity for further explanation as to how Jason was able to change his diet. Jason's response 'it's in me head now' and reference to quoting what is in 'the book' constructs his diet as taking on board lessons learnt. Jason also references the Slimming World's notion of 'food optimising'. Later Jason summarises this as eating the 'right things until you're full' and humorously that 'it's brainwashed me'. Thus John constructs some food categories as the "right things".

The above examples demonstrate a fraction of how participants constructed, at great length, lessons they had learnt and now practiced, typically with added details about what they eat before the diet in contrast with current eating practices. This is unsurprising in that the interviews made relevant (Edwards, 1998) men's accountability for their diet and weight loss regimes. What is perhaps novel about these interactions is the manner in which the men delivered their knowledge in such an educational mode to the interviewer. Sharing their lessons about food performs important identity work for the participants: they now position themselves as the educators rather than recipients of nutritional advice. Of note, food that is highly calorific (extract 1 line11-13), or that constitute a 'syn' (extract 2, line 10) are marked out as problematic. Furthermore, categories of food are constructed as being cut out (e.g. '*the*

bread', *the* cake', emphasis added). The upshot of this is that they establish these foods as highly calorific. Men, in our data set, appear to construct a transition from passive to active, naive to informed, dietary intake which is in stark contrast to previous findings where men typically distance themselves from diet talk.

'I miss my pork pies'

When questioned about their past eating practices and previous diets, participants typically oriented to the consumption of certain foods as in a way that signalled a strong ownership and pleasure aspect with their consumption:

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Extract 3: Interview 2 with Frank, NON
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1	Frank	yeah exactly you go back again yeah (.) it's like eating the
2		<u>right</u> food at the <u>right</u> time in't it?
3	Chris	yeah yeah=
4	Frank \rightarrow	=I mean I I love my burgers
5	Chris	ha ha really?
6	Frank	hah heh I do
7	Chris	£ who doesn't love a burger hey?
8	Frank	£ I do I love my burgers
9	Chris	hahhe (.)erm (.) so (.) it's about you say it's about eating
10		the right foods at the right times like(.)do you think you
11		know what the right foods at the right times ar:e?
12	Frank	well er (.) yeah plenty of protein (while) salad stuff instead of
13		eating em like (0.3) chips
14	Chris	yeah
15	Frank	erm (.) any greasy food like that
16		(0.2)
17	Chris	yeah

The extract above follows a discussion about dieting and subsequent regaining of weight loss post dieting. In line 1, Frank initiates a new topic 'eating the <u>right</u> food at the <u>right</u> time'. The subjective assessment of 'I mean I I love *my* burgers' (emphasis added), and Chris' receipt of this with laughter and "really?" are sequentially interesting turns. Why the laughter at this point? If the construction was changed to "I mean I I love my salad" would this have produced laughter? There appears to be a collusion following this in which Chris aligns himself to this construction of burgers, with his rhetorical question in a smiling voice "£ who doesn't love a burger hey?". Building upon Wiggins and Potter (2003, p. 526), 'subjective

evaluations can be used to account for the specific speaker engaging in specific activities'. Here, burgers are collaboratively constructed as food choices that are loved by both participants, yet the way they are built up as humorous clearly mark them out as separate from the construction of eating 'the right foods at the right times'. However, the interviewer still asks whether Frank knows what the right foods at the right time are. In response to this Frank constructs a comparative list which displays his knowledge base of the 'right foods' (protein, salad) instead of 'chips....any greasy food' (lines 12-13; 15).

The extract below also displays this pattern of acknowledging a strong attachment to certain foods.

Extract 4: Interview 3 with Jack, Motivate

EXII	act 4. miler	view 5 with Jack, Wollvale
1	Chris	erm <u>diet</u> and <u>fo</u> od and stuff like that (.)you know (.) have you
2		had much of a <u>his</u> tory with that like with with trying
3		to lose <u>weight</u> or (.) you know have you always been healt
4		like what (.)tell me about those kind of things
5	Jack	I would say .hhhh the reason why I'm overweight is more down
6		to m:yyy (.) <u>diet</u> than anything else=
7	Chris	=right
8	Jack	er:mm I mean (.)doing the exercise I don't mind doing the
9		exercise I'm cycling to work at the minute (.)not a problem
10	Chris	yeah
11	Jack \rightarrow	but (.) I like my chips (.) I like my chocolate (.) I I like food
12		I mean <u>I am a fussy eater</u>
13	Chris	right
14	Jack	it's unfortunate that the foods I do like are unhealthy for me
15		hah
16	Chris	£yeah
lat	erp8	
17	Jack	I mean I have I have done some things differently like I'm
18		eating chips <u>less</u> (.)erm I'm probably doing more boiled
19		potatoes and stuff like that
20	Chris	yeah
21		erm although like I say I still like my chips so=
22	Chris	=yeah
23	Jack	I'll have that every so often
24	Chris	yeah (.) yeah (.)£ got to still have some from time to time
25		haven't you?

In the extract above, Chris makes relevant Jack's history of diet, food consumption, and attempts at weight loss (lines 1-4) and begins to set up a task of accountability for his dietary intake. In line 3, Chris asks "have you always been healt", cutting off "healt" which potentionally could have been 'healthy'. Jack's response displays how he has understood this request as a point of accountability for his overweight status as 'more down to m:yyy (.) diet than anything else='. Jack next marks exercise out as not being the problem (lines 8-9). The discourse marker 'but' initiates a subjective assessment of certain food categories 'but (.) I like *my* chips (.) I like *my* chocolate (.) I I like food I mean I am a fussy eater' (emphasis added). By doing so, Jack constructs chips and chocolate as likeable and that his tastes are limited. Jack's next turn explicitly attends to foods that he likes as 'unhealthy for me'. While Chris does not explicitly align himself through laughter at this point, as he did with Frank, the smiley voice (line 16) potentially displays a soft alignment. Again we see that problematic food (as evidenced by Jack himself in line 14) is worked up as a strong bond with the use of 'my'. Later in the interview, when discussing his recent engagement with the weight loss programme, Jack constructs changes in his diet (lines 17-19). However, this is worked up minimally through the use of 'I have done some things differently', and 'less', and hedged as 'probably' cooking more boiled food. With the addition, 'I still like my chips' and the addition of 'I'll have that every so often' Jack constructs himself as still liking, and occasionally eating, one category of food that he has constructed as unhealthy.

These subjective assessments construct certain foods as harder to eliminate from their diets. When discussing 'my' food, participants do so in the present tense, potentially working up this bond as an enduring quality.

Assessing revised food palates

As certain food was constructed as harder to completely cut out of their diets, the interviewer frequently took the opportunity to pursue how participants adjusted to new modes of eating practices:

Extract 5: Interview 27 Ken, Slimming World

1 Chris erm::mm and in terms of (.) erm the food that you do eat now

2 do you still enjoy that 3 Ken oh yea:h 4 Chris 'cos you said I used to love my food (0.3) but have you now 5 learnt to ((exhales)) have you learnt to love the stuff that 6 you're eating nowdays?= 7 =yeah ooh yeah Ken 8 Chris so how does that work then cos you know (.) a few years ago you 9 would have enjoyed a $\underline{full \ fry \ up}$ and (.) if someone had said 10 well you can't you can't have that and you can't have that 11 you might have said (0.3) I want that 12 Ken Hmm hah 13 Chris but now you're enjoying having the stuff you know salads and 14 and whatnot 15 Ken yeah 16 Chris now you're enjoying that so (.) do you see what I'm asking 17 about I'm I'm trying to figure out (.) 18 Ken well I've (.) I've always loved salads anyway 19 Chris oh okay right 20 Ken I've always been a salad eater so I I'll you know 21 Chris right I love I love you know 22 Ken 23 Chris I'm just trying to figure out how how (.) how you still enjo:y (0.2) food which you might not have enjoyed so much (.)befor:e 24 25 this change had gone on 26 Ken er (0.3) I ca (.) say if I've like (0.2) chicken an (.)potatoes 27 and mushy peas (.) now before I used to pile up and with the 28 chicken I always used to have the skin on and everything 29 Chris yea:h 30 Ken well now I don't I I take the skin off 31 Chris yeah 32 Ken and I can have (.) different sauces as well with it 33 Chris right 34 Ken so (.) you know I put some sauce on and with me (.) makes it 35 taste better and everything 36 Chris yeah (.) so do you think now let's use the chicken skin example 37 do you think you still like chicken skin (0.2)or do you not 38 like it anymore? 39 Ken I don't like it any[more 40 Chris [right so (.) soon as I get a chicken it comes straight off 41 Ken yeah (.) so but is that because you know you shouldn't eat it 42 Chris or cos you you think I actually I don't like the taste 43 44 Ken well 45 Chris do you think? well bit of both 46 Ken 47 Chris right later ((cutting out an example of cutting cracking off pork)) so you know do you think your taste's changed? 48 Chris 49 Ken ooh yeah yeah me (.)tchh (.)yeah 50 Chris which is interesting int'it your taste's changed from it 51 Ken yeah 52 Chris cos you think you know that's this is what I like (.)but 54 it it's (.) a bit different 55 Ken yeah 56 Chris can you think of anything where that's where that's you you 57 know what what you thought you liked or what you do like is a 58 bit different now (.) er well↓ I like me white fish (0.3) you know I I put it in 59 Ken → 60 foil 61 Chris Yeah 62 Ken do in the oven and I love it that way

63 Chris	yeah
64 Ken	now before I used to go to the fis: chip shop and I used to
65	love it in their batter and everything (.).
66 Chris	yeah but now not so much
67 Ken	no not so much now no well not at all now if I have fish
68	it's just the white fish

Throughout extract 5 the interviewer employs some aspects of what Hoey and Kendrick (in press) are tentatively referring to as assessment implicative interrogatives. Their preliminary findings suggest that 'asking about another's perceptual experience of some object or event (e.g., have you seen X), in a sequence-initial position (e.g., as a new topic), formulating it as a question about general past experience (i.e., in the experiential perfect aspect), makes relevant or otherwise implicates an assessment of the object or event in question' (ibid, p17). In line 1, Chris produces a yes/no interrogative, which makes relevant a yes/no response (Raymond, 2003). However, the question is designed in way that conforms to most of Hoey and Kendrick's criteria – it is produced in a sequence-initial position; it is a question about Ken's perceptual experience; the question 'the food that you do eat now do you still enjoy it' deviates somewhat in that is referencing current experience yet this is hearable as a contrast to past experience; and appears to make relevant an assessment. However, Ken's response does not conform to the pattern evidenced by Hoey and Kendrick in that he does not produce an assessment. Thus in line 4 Chris revises his question and explicitly references the subjective assessment 'love my food' and questions whether Ken has 'learnt to love the stuff that you're eating nowadays?'. The way the question is designed marks out dietary changes and sets up an assessment of Ken's current food choice (lines 4-6). Again this produces an affirmative response with no expansion of an assessment (line 7).

In the next three turns (lines 8-11, 13-14 and 16-17), Chris presents an imagined scenario where he constructs a full fry up as something Ken might have enjoyed and something that, if told he could not have, would still be have been desired and acted upon. Chris then contrasts

this with a construction of current pleasure in eating 'salads and whatnot' and hearably begins to pursue an explanation for how this change occurred (this last action is incomplete). Ken prefaces his response with the discourse marker 'well' before disputing this categorisation with the subjective assessment of 'I've always loved <u>salads anyway'</u>. Ken's identity as somebody who does not "enjoy" salads is thus constructed as misconceived.

Chris, however, continues to pursue an explanation for a perceived change in the enjoyment of food which he constitutes Ken 'might not have enjoyed so much (.) <u>befor:e</u> this change had gone on' (lines 23-25). The consequence of this framing is that it sets up an expectation for some explanation to be produced by Ken. Ken provides a response that exemplifies his new eating regime with a construction of a past food choice, chicken, potatoes and mushy peas. Ken then documents how he has changed this dish – his previous dish is constructed as a 'pile up' of the chicken portion of the meal, a metaphor which is hearable as a 'large' portion (line 26). Additionally, Ken also uses the extreme case formulation (Pomerantz, 1986) 'always used to have the skin on'. Ken contrasts this with his new regime of removing the chicken skin and adding sauces to make it tastier (lines 30; 32; 34-35).

Chris then uses the chicken dish example to pursue what is potentially hearable as a change in food preference, 'do you think you still like <u>chicken skin</u> (0.2) or do you not like it anymore?'. This produces a preferred response (Clift, 2016) from Ken – he accepts the construction of chicken skin as not likeable. Seemingly 'unsatisfied' with this response, Chris continues to seek clarification, this time utilising two candidate responses which set the parameters of this change as being a change in taste or due to dietary ideals of what should not be eaten (lines 42-43). Ken's response is prefaced with the discourse marker 'well' which attends to the next construction of 'a bit of both', a dispreferred response.

Later, Chris explicitly poses a candidate question about whether Ken's taste has changed (line 48) which is accepted by Ken as valid. Chris constructs this as interesting (line 50) and 'a bit different' (line 54). However, Chris still pursues further examples of differences, framed in a manner that requires further examples from Ken (lines 56-58). Of relevance to our analysis, in line 59, Ken provides an example of 'I like *my* white fish' (emphasis added) and that 'I love it that way'. This is an interesting turn as this subjective assessment of oven baked fish is claimed, or 'owned'. Furthermore, Ken contrasts this with a construction of a past subjective assessment of loving fried fish in batter from the chip shop. In response to Chris' construction of 'now not so much', Ken's initial response is a preferred agreement before upgrading this assessment to 'no well not at all now'.

In summary, the interviewer sets up a long sequence of questioning to elicit a response which accounts for a change in taste in food that is *ultimately* collaboratively built up as healthier than previous food choices. Whilst this particular example was very laboured, there were numerous other instances where participants constructed changes to healthier food options. A collection of these formulations equated to 112 pages of data extracts thus we restrict our analysis to one further data extract below:

Extract 6: Interview 15 with Simon, Slimming World and Motivate		
1	Simon	and then erm (0.2) just had salad banana (.) your A choice and
2		your B choices your (0.2) er::m <u>cheese</u> and things like that
3	Chris	yeah
4	Simon	>but I don't eat cheese< I always had `cos I used to
5		drink 3 or 4 pints of milk a day
6	Chris	right
7	Simon	but she says oh you might as well be drinking lager hehaa
8	Chris	yeah huh
9	Simon	so all I have a day now is 250 ml
10	Chris	right
later ((discussing food eaten and the link to Motivate nutritional advice))		
11	Chris	<pre>cool (.) so how's it worked out? like(.) is it is alright</pre>
12	Simon	yeah yeah I've (.) I've got I've got used to it
13	Chris	yeah

14	Simon	I've cut sweets ou:t everything
15	Chris	yeah
16	Simon	I mean sweets was one of my main (.) jellies or anything like
17		that I would like mmm
18	Chris	yeah yeah

At this point in the interview, Simon had brought out his Slimming World food diary and was listing the food he had eaten that week. In line 4 Simon inserts an account of why he no longer eats cheese. His justification for this is framed in a before/after manner and employs active voicing (Wooffitt, 2001) of the Slimming World leader's critique of drinking the amount of milk he used to consume (line 7). Active voicing is rhetorically deployed to build up the authenticity of this fact (Wooffitt, 2001). Simon is thus constructing how he has taken on board nutritional advice and is adhering to the diet plan. In response to Chris' question of whether his new diet is 'alright', Simon's response is affirmative and he produces a three-part list with a completer which works up this instance as more generic stance of his new approach to his diet (Jefferson, 1990).

Both Ken and Simon's extracts are illustrative of the co-construction between interviewer (Chris) and participants of how their diets have changed. Furthermore, both participants assess their revised food choices as acceptable.

Conclusion

Our study has made a novel contribution to the literature by focusing on a large data set where food assessment is performed by older men who are obese and are attempting to lose weight. In contrast to other research (Gough & Conner, 2006; Newcombe et al., 2012), the men in our study typically constructed nutritional advice they received as enlightening. For example, the men constructed some aspects of information as newsworthy and challenging their previous understanding. Furthermore, the men often took advantage of the interview setting to deliver informational aspects of nutrition that were treated as newsworthy through detailing misconceptions about food, or drinks. Thus, participants involved in the weight loss programmes, constructed themselves as more aware of their food consumption and in a position to pass on their new found knowledge. In discussing raised awareness of nutrition, the participants were also performing important identity work (in the context of the project about weight loss) of displaying how their new understanding of changed dietary intake through detailed constructions of improved ("right foods") eating practices. The two weight loss programmes arguably formed a shared learning forum in which dietary information was constructed themselves as adhering to the imparted nutritional advice, although this is not to claim that all the participants rigidly positioned themselves as compliant with this (a few men constructed themselves as adapting diets to suit their own needs). Weight loss programmes which include practical nutritional advice appear to be having some impact in men's sense making practices of what constitutes healthy eating in the form of lower calorific impact.

During questions about past eating practices and previous diets, the participants often worked up 'ownership' and pleasure assessments associated with certain food choices through referencing such foods as 'my' (e.g. 'I like my chips'). These subjective assessments construct certain foods as harder to eliminate from their diets. Weight loss programmes might find this useful when designing dietary advice. For example, Slimming World advocate a balance of 'free' healthy food options in addition to 'syn' foods which can be eaten in moderation. For weight loss diets to work, they need to acknowledge that total dietary changes are hard for some people to adhere to, which some programmes currently do. Our interview study was useful in highlighting the way calorific food is constructed as a strong

bond for the men in our study. Many weight loss programmes hold discussions, post weight measurement each week, where weight gain is detailed through discussions about food intake and events to understand why weight gain/loss has occurred. Attention from the leader of the group to the way that their members frame food could highlight particular difficulties with certain foods and use this as a basis to explore dietary change.

Set against the discursive terrain of problematizing men's food consumption (Kiefer et al., 2005; Rothgrebber, 2012; Sabinsky et al., 2007; Wardle et al., 2004), and how men ascribe different meanings to healthy food options (Cavazza et al., 2015; Mróz et al., 2011; Sobal, 2005), it was interesting to explore how the men in our study constructed and assessed changes in their dietary intake. Of course, the context of the interviews about weight loss undoubtedly had some bearing on constructions of improved eating practices, yet the men discussed their diets in detail and at great length. The interviewer was also attentive to what the men said and explored issues that were raised, including the strong pleasure assessments that were constructed around certain foods that were constructed as highly calorific. As such, our study demonstrates men's sense-making practices around food appraisal in the context of weight loss, contributing new understanding of how men construct being able to switch and adjust to healthier eating practices.

Previous research has identified that men distinguish between 'tasteless' health food choices, healthy eating as monotonous and unsatisfactory (Gough & Conner, 2006), and discuss food in terms of fuel (Newcombe et al., 2012; Roos & Wndel, 2005). In contrast, other studies have suggested that some men have a more open approach to dieting albeit with some critique from other men (O'Brien, Hunt & Hart, 2009). In our study, participants contrasted old and new eating practices in a way that constructed their new regime as acceptable, and in one instance as 'owned' (see discussion of extract 5). These new eating regimes were discussed in detail, in a way that constructed adherence to dietary advice. New eating practices were constructed as acceptable. This is not to argue that dieting was not marked out by other men (friends, work colleagues) as going against masculine ideals, and some participants did orient to this in the data (not discussed in this article). Our point is that men's in-depth discussions of new eating practices displayed a level of 'investment' in revised modes of eating. They also constructed new modes of eating as effectively a change in taste (albeit with some prompting from the interviewer – see analysis of extract 5). However, in this example fish in batter is contrasted with 'me white fish' cooked in foil and is assessed with 'I love it that way'. Moreover, the educational tone that many men took when contrasting previous eating practices with new food choices was often worked up as ingrained (see for example lines 29 and 38 of extract 1 where Jason says 'it's in my heads now' and 'it's brainwashed me'). Nutritional advice was referenced as useful and the men in our study constructed changes in their eating practices which were worked up as less calorific than their previous food intake.

Our study is not without limitations. While we usefully illustrate constructions of changing food assessments of predominantly older men (who are under-researched in this area), most were White British/Irish men. Thus future research needs to engage with a wider range of ethnicities to explore any overlaps and differences. There was strong evidence that the pattern of food assessment was consistent across the range of ages of participants in our study (30-69, mean age 52) but conducting studies across different age ranges might demonstrate some discrepancies in much younger or much older groups of men. The data collected from our interviews were rich but inevitably shaped by the interview context with its focus on weight loss (Potter & Hepburn, 2005). However, our analysis takes into account the co-constructed

nature of the interactions. As such, these findings *might* not be as extensive in naturalistic contexts but without analysing such data this is hard to assess. Future research might usefully record men's discussions during actual nutrition meetings to further understand how healthy food is assessed *in situ*.

The innovative nature of our study is that it provides an analysis of new empirical data – food assessments from older men who are obese who are attempting to lose weight. The men in our study constructed changed diets as acceptable. Contrary to the majority of previous research, we suggest that the men in our study construct themselves as interested in dieting. Our analysis highlights that nutritional advice is constructed as challenging yet ultimately acceptable. Our participants readily discussed diet changes and were replete with before and after narratives which constructed changes in how they understood and enacted new food consumption regimes. Health promotion might work better if health food advice was conducted in collaboration with men who have changed their diet. Men may be resistant to the numerous, and often contradictory, messages about healthy/un-healthy food (Gough & Conner, 2006; Delaney & McCarthy, 2014) but if healthy food messages were co-developed with men who had who successfully changed their diet then this might be more acceptable for other men to follow. As Monaghan (2007b) discusses, in relation to men's views on BMI, health promotion must meet with credible everyday meaning.

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References

Archibald, D., Douglas, F., Hoddinott, P., van Teijingen, E., Stewart, F., Robertson, C., Boyers, D. & Avenell, a. (2015). A qualitative evidence synthesis on the management of male obesity. *BMJ Open*, 5.

Butland, B., Jebb, S., Kopelman, P., McPherson, K. Thomas, S., Mardwll, J. et al. (2007). tackling obesities: furture choices – Project Report, 2nd edition. London; Government Office for Science. 2007. Retrieved from <u>www.bis.gov.uk/assessts/forsight/docs/obesity/17.pdf</u>.

Campos, P. (2004). *The obesity myth: why America's obsession with weight is hazardous to your health.* New York: Gotham Books.

Caperchione, C.M., Vandelanotte, C., Kolt, G.S., Duncan, M., Ellison, M., George, E. & Mummery, W.K. (2012). What a man wants: understanding the challenges and motivations to physical activity participation and healthy eating in middle-aged Australian men. *American Journal of Men's Health*, 6(6), 453-461.

Cavazza, N., Guidetti, M. & Butera, F. (2015). Ingredients of gender-based stereotypes about food. Indirect influence of food type, portion size and presentation on gendered intentions to eat. *Appetite*, 91, 266-272.

Clift, R. (2016). Conversation analysis. Cambridge: Cambridge University Press.

Collins, C.E., Morgan, P.J., Warren, J.M., Lubans, D.R. & Callister, R. (2010). Men participating in a weight-loss intervention are able to implement key diatary messages, but not those relating to vegetables or alcohol: the Self-Help, Exercise and Diet using Internet technology (SHED-IT) study. *Public Health Nutrition*, 14(1), 168-175.

Delaney, M. & McCarthy, M.B. (2014). Saints, sinners and non-believers: the moral space of food. A qualitative exploration of beliefs and perspectives on healthy eating in Irish adults age 50-70. *Appetite*, 73, 105-113.

De Souza, P. & Cicltira, K.E. (2005). Men and dieting: a qualitative analysis. *Journal of Health Psychology*, 10(6), 793-804.

de Visser R.O., Smith, J. A., & McDonnell, E. J. (2009). "That's not masculine': Masculine Capital and Health-related Behaviour. *Journal of Health Psychology*, 14(7), p.1047–1058.

Donnachie, C., Wyke, S. & Hunt, K. (2018). Men's reactions to reciving objective feedback on their weight, BMI and other health indicators. *BMC Public Health*, 18, 291.

Drummond, M., & Smith, J. (2006). Ageing men's understanding of nutrition: implications for health. *Journal of Men's Health & Gender*, 3, 56-60.

Edwards, D. (1998). The relevant thing about her: Social identity categories in use. In C. Antaki & S. Widdicombe (Eds.), *Identities in talk* (pp. 15-33). Thousand Oaks, CA, : Sage Publications Ltd.

Edwards & Potter, (2001). Discursive psychology. in A.W.McHoul & M.Rapley (Eds). *How to analyse talk in institutional settings: a casebook of methods* (p 12-24).

Gard, M. & Wright, J. (2005). *The obesity epidemic, morality and ideology*. London: Routledge.

Gough, B., & Conner, M.T. (2006). Barriers to healthy eating amongst men: a qualitative analysis. *Social Science & Medicine*, 62, 387-395.

Gough, B. (2007). 'Real men don't diet': an analysis of contemporary newspaper representatrions of men, food and health. *Social Science & Medicine*, 64, 326-337.

Grogan, S. (2017). Body image: understanding body dissatisfaction in men, women and children. 3rd edition. Routledge: Oxon.

Gracia-Arnaiz, M. (2010). Fat bodies and thin bodies. Cultural, biomedical and market discourses on obesity. *Appetite*, 55, 219-225.

Hepburn, A. & Wiggins, S.(Eds) (2007). *Discursive research in practice: new approaches to psychology and interaction*. Cambridge: Cambridge University Press.

Hoey, E. M. & Kendrick, K. H. (in press). Conversation Analysis. In A. M. B. de Groot & P. Hagoort (eds.), Research Methods in Psycholinguistics: A Practical Guide. Wiley Blackwell.

Hutchby, I., & Wooffitt, R. (1998). Conversation analysis Principles, practices, and applications. Cambridge Polity Press.

Jefferson, G. (1990). List construction as a task and resource. In G. Psathas (Ed.), *Interaction competence* (pp. 1043–1045). Washington DC: University Press of America.

Kiefer, I., Rathmanner, T. & Kunze, M. (2005). Eating and dieting differences in men and women. *The Journal of Men's Health and Gender*, 2(2).

Kildale, C.L. & Syse, K.L. (2017). Meat and masculinity in the Norweigan Armed Forces. *Appetite*, 112, 69-77.

Kuchler, F. & Varium, J.N. 2003 Mistakes were made: misconception as a barrier to reducing overweight. *International Journal of Obesity Related Met Discord*, 27(7), 856-861.

Lewis, S., Thomas, S., Hyde, J., Castle, D., & Komesaroff, P.A. (2011). A qualitative investigation of obese men's experiences with their weight. *American Journal of Health Behaviour*, 35(4), 458-469.

Mallyon, A., Holmes, M., Covenay, J., Zadoroznyj. M. (2014). I'm not dieting. I'm doing it for science. Masculinities and the experienceof dieting. *Health Sociology Review*, 330-342.

Men's Health Forum (2005). Hazardous waist? Tackling the epidemic of excess weight in men. Retrieved from

https://www.menshealthforum.org.uk/sites/default/files/pdf/hazardouswaist.pdf

Monaghan, L. (2005). Discussion piece: a critical take on the obesity debate. *Social Theory & Health*, 3, 302-314).

Monaghan, L. (2007a). McDonaldizing men's bodies? Slimming, associated (ir)rationalities and resistances. Body & Society, 13(2), 67-93.

Monaghan, L.(2007b). Body Mass Index, masculinities and moral worth: men's critical understandings of 'appropriate' weight-for-height. *Sociology of Health & Illness*, 29(4), 584-609.

Mróz, L.W, Chapman, G.E., Oliffe, J.L. & Bottorff, J.L. (2011). Men, food and prostate cancer: gender influences on men's diets. *American Journal of Men's Health*, 5(2), 177-187.

Newcombe, M.A., McCarthy. M.B., Cronin, J.M., & McCarthy, S.N. (2012). "Eat like a man". A social constructionist analysis of the role of food in men's lives. *Appetite*, 59, 391-398.

NICE (National Institute for Health abd Care Excellenc) (2014). Managing overweight and obesity in aults – lifestyle weight management services, clinical guideline 53. Assessed August 22, 2018. Retrieved from <u>https://www.nice.org.uk/guidance/ph53</u>.

Norman, M.E. (2013). "Dere's not just one kind of fat": embodying the "skinny"-self through constructions of the fat masculine other. *Men and Masculinities*, 16(4), 407-43.

Nuttal,F.Q. (2015). Obesity, BMI and health: a critical review. *Nutrition Today*, 50(3), 117-128.

O'Brien,R., Hunt, K. & Hart, G. (2009). "The average Scottish man has a cigarette hanging out his mouth, lying there with a portion of chips": prospects for change in Scottish men's constructions of masculinity and health related behaviours. *Critical Public Health*, 19(3-4), 363-381

O'Hara, L. & Gregg, J. (2012). Human rights casualties from the "war on obesity": why focusing on body weight is inconsistent with a human rights approach to health. *Fat Studies*, 1, 32-46.

Pomerantz, A. (1986). Extreme case formulations: A new way of legitimizing claims. *Human Studies*, *9*, 219–229.

Potter, J. (1996). *Representing reality: discourse, rhetoric and social construction*. London: SAGE.

Potter, J. & Hepburn, A. (2005). Qualitative interviews in psychology: problems and possibilities. *Qualitative Research in Psychology*, 2, 281-307.

Raymond, G. (2003). Grammar and social organization: Yes/no interrogatives and the structure of responding. *American Sociological Review*, 68, 939–67.

Robertson, C., Archibald, D., Douglass, F., Hoddinott, P., van Teijlingen, E. et al. (2014). Systematic reviews of an integrated report on quantitative, qualitative and economic evidence base for the management of obesity in men. *Health Technology Assessment*, 18(35).

Roos, G. & Wndel, M. (2005). "I eat because I'm hungry, because it's good and to become full": Everyday eating voiced by male carpenters, drivers, and engineers in contemporary Oslo. *Food and Foodways*, 13(1-2), 169-180.

Rothgrebber, H. (2013). Real men don't eat (vegetable) quiche: masculinity and the justification of meat consumption. *Psychology of Men and Masculinity*, 14(4), 363-375.

Rowlands, S. & Gough., B (2017) Promoting nutrition in men's health, in J.M. Rippe (ed). *Nutrition in Lifestyle Medicine*. Springer: Switzerland.

Rozin, P., Hormes, J.M., Faith, M.S., & Wansink, B. (2012). Is meat male? a quantitatve, multi-method framework to establish metaphoric relationships. *Journal of Consumer Research*, 39.

Sabinsky, M.S., Toft, U., Raben, A. & Holm, L. (2007). Overweight men's motivations and perceived barriers towards weight loss. *European Journal of Clinical Nutrition*, 61, 526-531.

Sacks, H., Schegloff, E. A., & Jefferson, G. (1974). A simplest systematics for the organization of turn-taking for conversation. *Language*, 50, 696–735.

Szabo, M. (2014). "I'm a real catch": the blurring of alternative and hegemonic masculinities in men's talk about home cooking. *Women's Studies International Forum*, 44, 228-235.

Sellaeg, K, & Chapman, G.E. (2008). Masculinity and food ideals oof men who live alone. *Appetite*, 51, 120-128.

Sobal, J. (2005). Men, meat, and marriage. Models of masculinity. *Food and Foodways*, 12, 135-158.

Spencer, D.C. (2014). "Eating clean" for a violent body: mixed martial arts, diet and masculinities. *Women's Studies International Forum*, 44, 247-254.

Stibbe, A. (2002). Health and the social construction of masculinity in Men's Health magazine. *Men & Masculinities*, 7, 31-51.

Vartanian, L.R. (2015). Impression management and food intake. Current directions in research. *Appetite*, 86, 74-80.

Wardle, J., Hasse, A.M., Steptoe, A., Nillapun, M., Jonwutiwes, K. & Bellisle, F. (2004). Gender differences in food choice: the contribution of health beliefs and dieting. *Annals of Behavioural Medicine*, 27, 107-116.

Wardle, J. & Johnson, F. (2002). Weight and dieting: examining levels of weight concern in British adults. *International Journal of Obesity Related Met Discord*, 26(8), 1144-1149.

WHO (World Health Organisation) (2006). Global strategy on diet, physical activity and health.

Wiggins, S. (2017). *Discursive psychology: theory, methods and applications*. London: SAGE.

Wiggins, S. & Potter, J. (2003). Attitudes and evaluative practices: category vs. item and subjective vs. objective constructions in everyday food assessments. *British Journal of Social Psychology*, 42, 514-531.

Wooffitt, R. (2001). Raising the dead: reported speech in medium-sitter interaction. *Discourse Studies*, 3(3), 351.

Young MD, Morgan PJ, Plotnikoff RC, Callister R, Collins C. (2012). Effectiveness of maleonly weight loss and weight loss maintenance interventions: a systematic review with metaanalysis. *Obesity Reviews*, 13(5), p.393–408.

Appendix

Transcription notation: adapted from Jefferson G. Glossary of transcript symbols with an introduction. In Lerner G. H. ED. *Conversation Analysis: Studies from the First Generation. Amsterdam:* John Benjamins;2004; P.13-31.

(.) A full stop inside brackets denotes a micro pause, a notable pause but of no significant length.

(0.2) A number inside brackets denotes a timed pause. This is a pause long enough to time and subsequently show in transcription.

[Square brackets denote a point where overlapping speech occurs.

() Where there is space between brackets denotes that the words spoken here were too unclear to transcribe

(()) Where double brackets appear with a description inserted denotes some contextual information where no symbol of representation was available.

Under When a word or part of a word is underlines it denotes a raise in volume or emphasis

↑ When an upward arrow appears it means there is a rise in intonation

 \rightarrow An arrow like this denotes a particular sentence of interest to the analyst

CAPITALS where capital letters appear it denotes that something was said loudly or even shouted

Hhe he/ha ha ha denotes laughter within the talk

= The equal sign represents latched speech, a continuation of talk

:: Colons appear to represent elongated speech, a stretched sound

£ Indicates said in a smiley voice

> words ~< Portions of an utterance delivered at a pace noticeably quicker than surrounding talk