

1 **Making sense of humour among men in a weight-loss program: A dialogical narrative approach**

2 Timothy Budden¹, James A. Dimmock², Brett Smith³, Michael Rosenberg ¹, Mark R. Beauchamp⁴, Ben

3 Jackson¹

4

5 ¹ School of Human Sciences (Exercise and Sport Science), The University of Western Australia

6 ² Department of Psychology, College of Healthcare Sciences, James Cook University

7 ³ Department of Sport and Exercise Sciences, Durham University

8 ⁴ School of Kinesiology, University of British Columbia

9

10

11

12

13

14

15

16

1 **Note:**

2 This is an accepted manuscript (“author accepted” version) of an article published in
3 *Qualitative Research in Sport, Exercise, and Health* on 21st September 2021 available online at:
4 <https://www.tandfonline.com/doi/full/10.1080/2159676X.2021.1979635>

5 This paper is not the copy of record and may not exactly replicate the final, authoritative
6 version of the article. Please do not copy or cite without authors’ permission. The final article will be
7 available, upon publication, via its DOI: <https://doi.org/10.1080/2159676X.2021.1979635>

8 You may download the published version directly from the journal (homepage:
9 <https://www.tandfonline.com/toc/rqrs21/current>)

10 Published citation:

11 Budden, T., Dimmock, J. A., Smith, B., Rosenberg, M., Beauchamp, M. R., & Jackson, B. (2021).

12 Making sense of humour among men in a weight-loss program: A dialogical narrative approach.
13 *Qualitative Research in Sport, Exercise and Health*, 1-15. doi:10.1080/2159676x.2021.1979635

14

15

16

17

Abstract

Humour appears to be an important aspect of health-promoting efforts for some men. A better understanding of the role humour plays in men's health contexts may provide insight into the optimal design of health interventions for men. In this study, we explored the role banter, humour that blurs the line between playfulness and aggression, plays for men in a men's weight loss context. We applied dialogical narrative analysis to thirty interviews conducted with men involved in a men's weight-loss program that leverages competition to drive weight loss. Banter served several functions for men in the program, including allowing them to determine their social position during early group formation, feel good, develop camaraderie, experience respite, provide male inter-personal support in a counter-intuitive way, and 'be themselves'. Men could use banter as a tool to develop resilience for themselves, but could also adapt their approach to use banter as a means of providing support for others. Banter could also cause trouble, through conflict and misunderstandings, primarily understood through a lens of narratives of progressiveness, inclusiveness, and a 'changing culture'. Banter could do harm, by positioning oneself against certain characteristics, and as a tool to get under people's skin. However, an approach-orientation to one's problems may allow misunderstandings that arise due to banter to lead to enhanced group cohesion. Intervention developers ought to explicitly address the potential for banter (and humour more broadly) to have positive and negative effects in men's health contexts.

Keywords: humour, banter, men, masculinities, health, sport

Making sense of humour among men in a weight-loss program: A dialogical narrative approach**Introduction**

Humour is a complex and dynamic social phenomenon that typically occurs spontaneously in interactions between two or more people (Martin & Kuiper, 1999). In situ use of humour involves constructing messages that ‘break the ice’, deflate tension, and ideally elicit positive responses such as laughter, smiling, or sudden exhalations indicative of positive experiences (Booth-Butterfield & Booth-Butterfield, 1991; Meyer, 2000). Effective humour usage may afford individuals with various positive interpersonal outcomes—‘funny’ people are seen, for instance, as attractive mates (Buss, 1988) and desirable friends (Wanzer, Booth-Butterfield, & Booth-Butterfield, 1996). In addition to important interpersonal properties, humour also affords individuals with various personal benefits such as regulating stress and negative emotions (Francis, Monahan, & Berger, 1999; Geisler, Wiedig-Allison, & Weber, 2009), lower depression and state-trait anxiety, higher optimism, self-esteem, and well-being (Martin, Puhlik-Doris, Larsen, Gray, & Weir, 2003). It is perhaps unsurprising, given the array of desirable personal and interpersonal effects with which it may be associated, that humour has been recognised in the public health literature for its potential salutogenic properties—that is, that humour “has the potential for health promotion in itself” (Cernerud & Olsson, 2004, p. 396).

Humour appears to be an important aspect of health interactions for some men. For instance, Smith and colleagues (2008) identified the thoughtful use of humour as a core quality that men valued in interactions with general practitioners. Humour lessened the perception of seriousness of consultations and reduced tension, creating a laid-back and friendly environment where men felt comfortable speaking about their health. Understanding (and harnessing) humour may also support men’s involvement in health promotion activities, by serving multiple functions. These include (a) promoting inclusiveness, (b) marking appropriate boundaries, and (c) and developing masculine norms (e.g., around men’s evolving sexuality in men’s prostate cancer support groups; Oliffe, Ogrodniczuk, Bottorff, Hislop, & Halpin, 2009). Humour can provide a socially sanctioned means for men to address

1 health problems, and experience social connectedness with other men (Williams, 2009). However,
2 heightened masculinity (i.e., rigid and fixed conceptions of men’s gender roles) can contribute to men
3 avoiding the disclosure of vulnerabilities regarding their health, and competitive ‘banter’ can also
4 reinforce power relationships among men.

5 Based on the evidence documented above, humour appears to be important for (at least some)
6 men, and may play a role in determining the appeal (or lack thereof) and effectiveness of health
7 promotion initiatives. We were guided by this principle in devising the present study and sought
8 broadly to examine men’s stories about humour—including its use and function—within a male-only
9 health promotion (specifically, a weight loss) program. In an effort to stimulate men’s engagement in
10 weight loss initiatives (within ‘Western’ countries), several sport-based programs (e.g., Football-Fans in
11 Training) have been developed with the goal of engaging and retaining men by leveraging their
12 identification with sport teams and/or their desire to be involved in sport itself (e.g., Gray et al., 2013;
13 Kwasnicka et al., 2020; Maddison et al., 2019; Wyke et al., 2015; Hunt et al., 2014). Explicitly
14 addressed within the design and style of delivery of these programs is the value of humour or ‘banter’,
15 with the aim being to use and encourage humour in a way that supports men’s ability to address
16 sensitive topics such as weight gain. Qualitative work on these programs (see, for example, Bunn et al,
17 2016) supports the notion that positive forms of banter within these settings promotes adherence by
18 creating perceptions of social bonds, mutual support, and contributes to a “buzz” or “excitement” in the
19 program environment. It is beyond the scope of the current article to explore the development of these
20 programs; for interested readers, this topic is discussed extensively elsewhere (for more information,
21 see: Hunt et al., 2020). Support for this approach was provided by Robertson and colleagues’ (2014)
22 synthesis of qualitative, quantitative, and economic evidence for the management of obesity in men.
23 Given that humour is recognised as a particularly important process within health interventions for
24 some men, a better understanding of how it is used and how it ‘operates’ in these settings promises to
25 provide valuable insight into the optimal design of such programs.

1 Study Aims

2 In this study, we sought to explore men’s stories of humour, or more specifically ‘banter’, in
3 MAN v FAT Soccer (MVFS), a male-only, sport-based weight loss program. In formulating this broad
4 research aim, we were guided by the literature reviewed above, and by recent qualitative research
5 highlighting the determinants of men’s experiences in this type of weight loss program (see Budden et
6 al., 2020). A note on terminology is important—in this study we adopted the term ‘banter’ for several
7 reasons: (1) the word ‘banter’ appears frequently in the literature discussing men’s use of humour in
8 health contexts; (2) ‘banter’ is often used in common parlance in sporting contexts in the United
9 Kingdom and Australia, and most men in MVFS come from these countries; (3) the word ‘banter’ was
10 commonly used by participants in the aforementioned investigation of this type of program (i.e.,
11 Budden et al., 2020); (4) we believe the word ‘banter’ evokes more potentially contentious uses of
12 humour than ‘humour’, and likely provides more insight into the potential for humour to ‘go wrong’ in
13 this context. Our approach is grounded in the relational analytical approach described below. In
14 essence, stories become *embodied* (Frank, 2010; Smith, 2013). Stories *do* things, *shape* us, and we in
15 turn *shape them*. As such, we were specifically focused on addressing the following theoretically
16 informed questions: (a) what does humour or ‘banter’ ‘do’ for these men, and what role does it play in
17 this health context?; (b) how and when does humour or ‘banter’ go ‘right’, and how and when does it
18 go ‘wrong’?; and (c) how are men’s humour or ‘banter’ stories positioned within their broader
19 experience in a male-only health promotion activity?

20 Methods

21 Philosophical and Theoretical Underpinning

22 Narrative analysis is a way of engaging with and presenting storied data (Smith & Monforte,
23 2020). By focusing on “people as active social beings” and “on the way personal and cultural realities
24 are constructed through narrative and storytelling” (Sparkes, 2005, p. 191), narrative approaches enrich
25 our understanding of people’s sport, exercise, and health-related experiences (see, for example;

1 Douglas & Carless, 2014; Frank, 1995). Narrative analysis is a practical medium (Smith, 2016), and the
2 broad focus of narrative approaches is to analyse the stories people tell. In this study, we conducted a
3 dialogical narrative analysis (DNA; Frank, 2002, 2012), in which a narrative constructionist approach
4 informed our analysis (Smith & Monforte, 2020), rooted in epistemological constructionism and
5 ontological relativism (Sparkes & Smith, 2013). From a narrative approach, humans are meaning-
6 makers, and stories serve a practical role in that they help constitute experience and guide action
7 (Frank, 1995, 2010). Whilst people tell stories, we draw on the narratives that circulate around us in the
8 cultural discursive landscape we live in, and these narratives help *shape* us.

9 **Sampling Procedure and Participants**

10 The Human Research Ethics committee at the first author's institution granted ethical approval
11 for this study. A purposive sampling strategy was used to recruit men who had participated in the first
12 season of one of seven MVFS leagues (six in Western Australia, and one in South Australia). The
13 sample included 30 players (aged 21 to 71 years, average age 40.5, SD = 11.2). A combination of
14 snowball and maximum-variation sampling methods were used to recruit participants (Sparkes &
15 Smith, 2013). Participants were eligible for the study if they were adult males (aged 18 or over) who
16 had completed a 14-week season at a league following a given league site's first season. At the end of
17 each initial season, players were invited to participate in interviews to discuss their experiences in the
18 program with the first author via a generic email and WhatsApp message (i.e., all participants in each
19 league were in a league-wide WhatsApp group). On the recommendation of league coaches, specific
20 information-rich participants were contacted. The first author conducted the interviews, and scheduled
21 visits to each league location (except the league in South Australia) during the season. The average
22 start-of-season body-mass index (BMI) for the participants was 35.23 (SD = 6.9), average end-of-
23 season BMI was 32.43 (SD = 7.1), with the average weight loss 9.7kg (SD = 6.1). Eligibility for the
24 MVFS program required that participants identify as male and have a BMI greater than 27.5. This
25 inclusion criteria for the program incidentally narrows the focus of this study to the experiences of men

1 who were overweight (i.e., BMI > 25.0) or obese (i.e., BMI > 30.0) at the beginning of the program.
2 Two players in the sample had achieved a ‘healthy’ weight according to BMI by the conclusion of their
3 first season.

4 **Data Collection**

5 After providing informed consent, participants were involved in semi-structured interviews with
6 the lead author, which were conducted either face-to-face at a convenient location of the participants’
7 choosing (e.g., a café, pub) or over-the-phone. During the interviews, an interview guide (developed
8 with co-authors XX and XX) was used in a flexible manner to elicit participant responses. Data
9 presented in this study were collected as part of a broader program of research evaluating the feasibility
10 of wide-scale implementation of the MVFS program in Australia. Specifically, in addition to telling
11 stories in these interviews about their experiences and use of humour within the program, participants
12 were also asked to offer insight into program feasibility. The aspects of the interviews relevant to this
13 study (and these specific research questions) are outlined below. Participants were first asked to
14 provide a back-story for their involvement in the program (i.e., “I’d like to understand a little about
15 your personal story in terms of why you enrolled in MAN v FAT Soccer. Can you give me a bit of a
16 back story for joining the program?”). Participants were then asked to reflect on their experiences with
17 ‘banter’ during their involvement in the program. Initially, participants were asked to describe what
18 they considered banter to be (i.e., “In your own words, what is banter? How do you define it?”), and
19 then asked to provide examples of it (i.e., “Can you give me some examples from within the
20 program?”), how they use it (i.e., “How do you personally use banter?”), how their team used it (e.g.,
21 “Did your team use banter?”, “How does your team use banter?”), and the potential positive and
22 negative effects of banter (e.g., “What are your thoughts about how it can be used best, and what to
23 avoid?”). In total, 29 interviews were conducted (with one joint interview, involving two participants),
24 lasting between 20 minutes and 1.5 hours. Participant names were replaced with pseudonyms during
25 transcription.

1 **Data Analysis**

2 All interviews were recorded and transcribed verbatim by the first author. DNA involves an
3 iterative process of engaging in a dialogue with storied data. The process involved the first author
4 immersing himself in the data by listening to audio-recordings, as well as reading and re-reading
5 interview transcripts, notes, and observations recorded following interviews. Transcripts were
6 condensed to produce thirty individual player stories, which were then subjected to DNA. First, each
7 story was explored for content: what narrative themes and relationships could we identify within each
8 story? What (if any) were the common trends across stories? Second, each story was subjected to a
9 series of *dialogical questions* relevant to our study aims (Frank, 2012). We focused on *connection*,
10 *identity*, *function*, and also *ethical* questions (see Smith & Monforte, 2020): “Who do these stories of
11 banter connect you with?”; “How might groups be formed through a shared understanding of a story?”;
12 “Who does the storyteller speak against?”; “What stories give this person a sense of who they are?”;
13 “What does banter do *for* or *against* this person?”; “What are the ethics of banter, how does it go right
14 or wrong?”. Third, ‘small’ stories were analyzed to derive further insight into the *how* (i.e.,
15 mechanisms) of narrative activity. Small stories refer to the fleeting and spontaneous stories told in
16 everyday interactions and occurrences, whilst a ‘big’ story refers to a participant’s ‘whole’ story about a
17 certain topic that is invited during interviews (Griffin & Phoenix, 2016). Small stories are important to
18 consider as they reveal how speakers convey a sense of self and identity in context, and how talk as a
19 form of social action acts in what might appear mundane ways but is nonetheless vital to understanding
20 everyday psychology (Griffin & Phoenix, 2016).

21 It is worth noting some characteristics of the lead author (and interviewer) in this study, as well
22 as the broader research team, as these considerations inevitably influenced the direction and content of
23 interviews, and shaped the process of analysis. Firstly, the lead author was involved in the evaluation
24 of the program mentioned in this study, and at times was involved in the implementation of the
25 program, meaning that the lead author had a friendly acquaintance-based relationship with some

1 participants. With others, the extent of the relationship was through the lead author's role as research
2 coordinator in the program. All members of the research team, including the lead author, had prior
3 experience in team sport environments, including cricket, rugby, field and ice hockey, and soccer. As
4 such, the concept of 'banter' was familiar to each researcher, but perspectives on the subject matter
5 were different, and this difference in perspectives (to an extent) is reflected in the results that follow.
6 Experiences during the initial implementation stages of the program highlighted the fact that humour
7 (or 'banter') played an important role for some players, and that further research could illuminate this
8 role. The process of analysis forced the lead author to challenge their own pre-conceptions of the social
9 function of humour, and specifically banter.

10 **Rigor**

11 Commensurate with our philosophical approach, we adopted a number of strategies to ensure
12 that our findings were rigorously explored and presented. These included the first author engaging in a
13 series of 'critical friends' (Sparkes & Smith, 2013) meetings with each co-author, and at times, with
14 them collectively. Ahead of each of these meetings, summary 'findings' and the complete analysis
15 document were shared, so that each co-author could challenge and provide alternative interpretations.
16 Further, throughout the analysis process the first author recorded emerging analytical interpretations in
17 a reflexive diary, an important aspect of being reflexive about one's position as researcher in analysis.
18 The stories presented below are representative of the key narratives that we identified in the thirty
19 interviews conducted with participants. Our results presented below are taken as broadly representative
20 of the key narratives we identified in the thirty interviews conducted with participants. We present an
21 analysis of five exemplary stories. We do not intend to imply that all 30 stories are exactly like these,
22 but instead acknowledge that these analysed stories bear marked similarities to many other stories
23 within our sample. Some nuance has been omitted, for the sake of presenting a concise article, and we
24 do not claim to have presented an exhaustive account of men's stories of banter—had more participants
25 been interviewed, for example, we may have been able to generate additional narratives.

Results

Our results highlight several roles banter played *for* men in a men's health promotion setting. In the results, we present five stories categorized under two broad headings. First, we present two stories that illustrate the 'good' things banter could do *for* men. The stories presented are representative of the kinds of work banter could do for men, as captured in the data collected for this study. In the second section, we present analyses of stories that discuss the potential of banter to cause 'trouble' for men, through conflict and misunderstandings. We also provide insight into how banter could initially cause 'trouble', but certain stories allow this 'trouble' to be averted, and ultimately help build team cohesion. Finally, we highlight that banter could have a complicated relationship to health behaviour, as a form of pleasure seeking.

Banter Doing 'Good' Things for Men

Masculinity, Banter, and Responsibility

The most important aspect of our findings was that banter enabled men to perform masculinities. Masculinities reflects the notion expressed by participants that the environment in the program allows men to behave "like men"—they can be competitive, demonstrate prowess on the pitch, and ultimately are responsible for and accountable to their teammates, to lose weight, be healthy, and maintain their relationship with members of their team. This first story, exemplified by Peter, demonstrated how being 'caught up' in a story of masculinity, accountability, and camaraderie shaped communication between men involved in the MVFS program. Banter did things *for* the men in the program: in light of the circulating narratives in the context of MVFS of responsibility and accountability to lose weight, be healthy, and maintain their relationships with their teammates, banter allowed men to provide inter-personal support in a 'counter-intuitive' way. By using 'aggressive' forms of banter, that are intended to be playful, men may feel good, develop camaraderie, and get over 'heated moments' during games.

1 Peter felt responsible and accountable to his teammates to lose weight. This narrative shaped
2 how he communicated with this teammates—not only did he feel a “sense of commitment” to lose
3 weight, he expected a similar commitment from them. The program worked for Peter because “It’s just
4 men being men”, and it’s not “fancy dancy. That is to say, tell the truth, speak the truth, you know? You
5 speak the truth. It’s fine. What’s working and what’s not, and there’s no embarrassment.” Banter did
6 good things for Peter, in that in light of this narrative of accountability and responsibility driving health
7 behaviour, banter allowed men to develop camaraderie, strengthen team ‘spirit’, and ‘get over’ heated
8 moments on the pitch:

9 [Banter] just builds up spirit. It just because you’re having a laugh and you’re, you’re enjoying
10 it. It just brings you together, makes you more to get over stuff. A few times people lost their rag
11 on the pitch, and it’s like ‘Sorry, it’s just heat of the moment.’

12 Banter allowed Peter to *feel good* and account for his competitive behaviour on the pitch,
13 keeping the relationships with his teammates going. Banter also allowed men to support each other in a
14 counter-intuitive way, in that they could use aggressive forms of humour with people with whom they
15 were familiar, that was intended to be playful: “You wouldn’t walk up to a stranger and call them a fat
16 bastard. You wouldn’t, whereas it’s one of your mates. It’s encouragement. It’s sort of encouragement
17 in an arse-about-face way.” Banter can cross social boundaries:

18 If you’re being nasty, it’s not banter. It’s that line. Do you know where you can say something
19 and it’s, you make someone laugh about it. They know you’d like if I, for instance, if you’re all
20 about like, you’re calling someone the fat bastard. But they get it and its okay. It’s not, it’s not
21 like it’s being nasty about it. It’s having a laugh.

22 Banter also allowed men to become familiar with one another, to understand each other’s
23 personality, and this developing sense of familiarity shaped what humour was considered acceptable in
24 on-going interactions. “It’s getting, you’ve got to know who you’re dealing with. I guess something one

1 person finds funny, another person won't. So you've got to know them and once you know them you
2 can use it."

3 **Banter as a Multi-faceted and Adaptable Social Tool**

4 The crux of the second story frequently expressed by participants is that banter is a multi-
5 faceted and adaptable social tool that does things *for* men. During the initial stages of group formation
6 in the program, banter was a tool that enabled men to determine their position in the social hierarchy.
7 Over time, banter then allowed men to 'let their guard down'. Banter provided men with respite (i.e.,
8 from mental health concerns, every-day responsibilities as husbands, fathers, employees). Men could
9 use banter to develop resilience *for themselves*, but banter also enabled them to provide support in
10 different ways for different people. Finally, banter provided a means of reprimanding inappropriate
11 social behaviour.

12 This story is exemplified by Lucas. Throughout Lucas' story circulates a narrative of 'personal'
13 responsibility. However, while this personal responsibility may be felt internally, it exists in relation to
14 others. Lucas noted that personal responsibility was the driving force that compelled men (and,
15 particularly, fathers) to join the initiative in the first place. Throughout Lucas' story, banter played
16 several important roles. At the beginning of the program, banter allowed men to 'peacock', and
17 determine their initial social position:

18 ...First week of an initiative like this, banter is peacocking. Nobody knows each other, nobody
19 knows what to say to each other. Banter starts as showmanship, and then turns into the verbal
20 form of camaraderie, as the weeks go on and the guys get to know each other, and by the end of
21 it your team is speaking their own language which they would consider to be their banter...
22 Banter can be inclusive, it can be exclusive, it can be offensive, it can be harmless, it can be
23 everything... Banter is everything you wouldn't say in a formal setting, and this definitely is not
24 a formal setting, it never feels like a formal setting, it always feels like you can put your guard
25 down.

1 For the storyteller, banter helped alleviate anxieties during the initial stages of meeting his
2 teammates, and played a vital role in developing a sense of familiarity with the other men in the
3 program. After an initial process of showmanship, whereby banter allowed men to constitute their
4 position in the social hierarchy, banter contributed to creating a sense that men were in an informal
5 setting, where they could ‘be themselves’. Against the backdrop of the circulating narrative within the
6 context of MVFS of personal responsibility, banter allowed men respite—from their responsibilities,
7 “escapism for Dads, men with a lot of responsibility at work”. For the storyteller, banter provided an
8 attractive alternative to the seriousness of the men’s everyday lives, as a social tool that “consistently
9 informalizes”. Serious conversations have their place, but:

10 A lot of guys don’t want to have serious conversations...to sit around for an hour...and talk
11 about their problems, when there’s such a good opportunity to sort of have fun and try and take
12 some positives. When there’s an opportunity to go and play sport, do that, if you want to meet
13 outside and not have banter, yeah, you probably couldn’t have a serious conversation in most of
14 the teams which is kind of refreshing.

15 For Lucas, there was more to be had from “burning energy and trying to see an improvement in
16 yourself physically...the knock-on effects of that for your own mental health are huge and...banter is a
17 prime tool”. Lucas used banter *for* himself in that it helped affirm a sense of resilience: “I’m more
18 inclined to rate the quality of your insults than worry about the damaging effects of them”. Whilst
19 banter was used to help constitute a sense of resilience *for* the storyteller, it also worked differently, at
20 different times, *for* others, as a tool to encourage other men to continue in the program. While the
21 narrative of responsibility is pervasive and circulates between the men in the program, it is not
22 universally positive. Responsibility could be a difficult or heavy narrative to bear, as was demonstrated
23 by the story of one player in Lucas’ team, Jack. Jack struggled during the season, both to lose weight
24 and on the pitch. He also experienced personal issues outside of the program. Lucas, and his team,
25 adapted their approach to using banter to encourage this player. At first, driven by a narrative of

1 accountability and responsibility, they adopted a “Let’s push this guy a little bit, see if we can squeeze
2 something out of him” approach. Over time, they realized that he was on a “completely different
3 journey” and that this approach would not work. Instead, they adopted a “less stick driven and more
4 carrot driven approach”, giving the player “little targets to try and hit”, congratulating him for “even
5 the smallest effort”. Ultimately, Lucas was able to jettison this story or, perhaps, conceive of a different
6 story that made sense for this struggling player, and banter served as a malleable tool to aid this
7 process. Jack, in his interview, reflected on this process:

8 I thought [the program] was a great idea. And it comes down to the whole banter thing. If we
9 didn’t have a good week, it wouldn’t just be banter, but the teammates would also rally behind
10 us and try to actually motivate us to succeed. Because if we didn’t lose weight, we were not
11 only letting ourselves down, but we were letting everyone else down. It wasn’t something that
12 we wanted to do.

13 Finally, banter can be used as a means to demonstrate the appropriate social ‘boundary’, the
14 ‘line’ that ought not to be crossed, and to reprimand inappropriate social behaviour. There were some
15 comments Lucas considered inappropriate about some female support staff in the program. Lucas noted
16 there were:

17 ...certain things that were said by certain people that weren’t cool, that kind of banter...as far as
18 [Lucas was] aware [the girls] probably didn’t hear too much of it, nothing was said in proximity,
19 but ... certain people had to step up and say ‘Hey, knock it off, there’s a line’.

20 In summary, the crux of this story is that banter can do things *for* someone, and this aligns with
21 narratives such as masculinity, resilience, accountability, and responsibility. At the same time, this story
22 suggests that such a masculine, personally adaptive approach to banter does not mean that Lucas was
23 not self-aware, or that he did not engage in self-reflection. While recognizing the benefits of such an
24 approach to humour *for* himself, Lucas was capable and motivated to adapt this approach to suit others.

25 **Banter Causing ‘Trouble’**

1 In this section, we highlight stories of when banter caused ‘trouble’. Our analyses of our sample
2 resulted in the selection of the following three stories demonstrate the ‘trouble’ banter can cause in
3 health programs. In the first, in light of a narrative of cultural change, progressiveness, and a desire to
4 create an ‘inclusive’ environment, banter allowed men to position themselves against certain
5 characteristics (such as age, gender, and sexuality). As such, banter is a tool people can use to their own
6 advantage, and at the detriment of others. The second story provides insight into stories where banter
7 initially caused ‘trouble’—conflict or misunderstandings—but a narrative of approaching one’s
8 problems and responsibility lead to conflict-resolution and a more cohesive team environment. In the
9 third story, while banter can be used to ‘feel good’, it can also be used to ‘get under people’s skin’, and
10 may reflect, to some extent, sensation-seeking.

11 **The Changing Face of Banter**

12 The first story, exemplified by Max, represents the ‘changing face of banter’. Within a broader
13 narrative of cultural change, progressiveness, and a desire to create an ‘inclusive’ environment,
14 emphasis within this story is placed on the potential of banter to do harm. Within this story, banter
15 undermined male interpersonal support. For Max, the program was a means to connect with men
16 socially. A narrative of accountability and responsibility circulated within his team, shaping the ways
17 they communicated and supported one another. For Max, banter was a means to create and magnify
18 differences between people. Banter “used to be, back in the old days, [banter] used to be a behaviour
19 whereby typically males would make fun of, laugh at, perhaps inappropriately, with a whole air of
20 humour, towards each other”, and culturally it was “largely accepted”. Banter was a tool people “use to
21 their own advantage”, to “position yourself against, or to pick on” differences between people. Max
22 evoked a narrative of a changing, progressing society, stating that “the face of banter today is changing,
23 or has changed”, and “it’s almost no longer acceptable, because, you know, we are more educated as a
24 society, we’re now more accepting as a society”. Banter “in traditional ways” does harm by
25 transgressing “social exacted guidelines”, whether it is “bullying, humiliation, sexual orientation”.

1 Banter undermines male interpersonal support within this story for Max. For Max, discussions with his
2 teammates were “normally around weight, ‘Did you weigh in, did you lose weight’ so to be honest, on
3 reflection, I didn’t hear a great deal of banter, it was more...we were more encouraging and engaged in
4 the aims of the program other than I guess banter.” In Max’s story, we see the narratives of
5 accountability and responsibility acting on Max in a different way to Lucas and Peter. In summary, we
6 see the potential of banter to do harm, and this makes sense considering an evolving narrative of
7 cultural change and progressiveness.

8 **Dealing with Conflict when Banter Goes ‘South’**

9 The second story is a small story told by Kyle. Kyle, an older player (aged 59 at the time of the
10 interview) told a story where a joke, a contentious form of banter (that blurred the lines between
11 aggression and playfulness), went ‘wrong’. In this story, though, we see how drawing on a broader
12 narrative of an approach-orientation to problems allowed this ‘trouble’, an initial misunderstanding that
13 could have become conflict, to create cohesion in his team based on a shared understanding of the
14 program context, the personalities of the members of the team, and the intent behind banter. Banter
15 allowed the men to shape their team culture and the way they communicated with one another. One
16 player, Paul, in Kyle’s team, was a particularly “outspoken” person who “could offend people...if they
17 were not aware of his personality”. Paul joked about Kyle’s age in their team WhatsApp. Privately, the
18 team captain contacted Paul, concerned that Paul had offended Kyle. Paul called Kyle on the phone,
19 saying “Oh, have I offended you, I apologize if I had”, to which Kyle replied “No, you haven’t at all”,
20 because “That’s the kind of thing I love, where you can take the p*ss out of each other”. Banter does
21 several things *for* Kyle: it affirms his personality, connects him to others, and allows him *respite* by
22 letting him “look at life a bit light-heartedly and then have a laugh about it.” In this story, we see the
23 potential ‘trouble’ banter can cause being dissipated by Kyle’s ability to draw on his understanding of
24 the multi-faceted nature of banter, and the many roles it can play *for* him.

1 However, relating to the ‘trouble’ (i.e., conflict, misunderstandings) banter can cause, Kyle
2 stressed the importance of knowing others’ personalities for banter to ‘go well’. You can say something
3 “that’s aggressive”, or “you can be having a laugh”. For Kyle, understanding where someone is coming
4 from (i.e., the intention of a contentious joke), and their personality, allows team cohesion to develop,
5 as was the case in this story: “From that day on, [the team captain] and Paul were really, really friendly,
6 you know, they got on really well because they’d actually had this discussion.” The storyteller draws on
7 a narrative of approach-orientation to make sense of this story: Paul’s “that sort of guy, where he’s a
8 sociable guy and he won’t hide away from his problems, he will go and approach that problem and sort
9 it out.” Further, Kyle draws on the narrative of a changing, progressive cultural environment but this
10 story acts on him in a different way than it does for Max. “In this day and age where everything is ‘You
11 can’t say this to somebody, you can’t say that’”, it is important for men to have an environment where
12 “you got a group of guys who understand each other, you say what you like, you say something that
13 you can’t say in the ‘real world’”.

14 Within Kyle’s story we see how banter certainly could cause ‘trouble’, based on the types of
15 ‘positioning’ against characteristics (such as age) that Max mentioned in his story, but by drawing on
16 narratives such as an approach-orientation to conflict, allowed a cohesive team culture based around a
17 shared understanding of banter to develop. One can also see how, in light of narratives around the
18 changing cultural climate, Kyle perceived a need for this type of space. Creating such a context is
19 important for these men to address their physical and mental health.

20 **Pleasure-seeking and Banter**

21 Another small story illustrates that banter has a complicated relationship to health, for some. In
22 this story, we see banter as a means to produce momentary instances of pleasure. Banter allows people
23 to *feel* good, but this can also be achieved at the expense of others. Dennis experienced tough situations
24 in his life outside of the program. An academic facing job insecurities, Dennis was a self-described
25 “functional alcoholic” who used alcohol to alleviate writing anxieties. He lost weight in the program,

1 but certain changes, such as going teetotal and abstaining from alcohol, weren't sustainable for him. He
2 went through tough periods "in [his] own head", and the drinking allowed him to "numb" the "mental
3 pain". In a similar sense, banter allowed him to "[push] humour to the limit. It's not always politically
4 correct, can't always share it with your partner. Definitely don't want to say what you've said at a
5 sports time at work." "[Trying] to find the comedy out of a sh*t situation is a good first pass for banter,
6 but I think it's also trying to get under people's skin. So not always for positive reasons, but I think,
7 encouraging people with a comical attitude can also work." Dennis' account above highlights the
8 multifaceted nature of banter. Dennis was not, perhaps, able to engage in banter the way he normally
9 would in the program, he "didn't feel comfortable enough to go 'full street' when it came to banter, and
10 from where I'm from, it gets pretty choice [laughs]." Banter does important things *for* Dennis, namely
11 that it allows him to make light of his anxieties and in a similar vein as alcohol, perhaps "numb" mental
12 pain, producing momentary instances of pleasure.

13 **Discussion**

14 In this study, we utilised dialogical narrative analysis (DNA) to explore men's stories of 'banter'
15 within a men's health context. Our aim was to shed light on what banter does for men in this kind of
16 setting. In the following section, we discuss these findings in light of previous research on the MVFS
17 program, contemporary theory and research on humour, and theory on men's health promotion. With
18 this theoretical basis, and findings from this study, we conclude by addressing suggestions for future
19 research.

20 The stories presented in the results section demonstrate how narratives of masculinities,
21 responsibility (i.e., to lose weight, and be healthy), accountability (i.e., to achieve weight loss and
22 health for teammates, friends, or family), and resilience circulated between the men in the sports
23 program studied, shaping the role banter (i.e., humour that can be interpreted as either playful or
24 aggressive) played for the men. Banter served several reportedly positive functions, including allowing
25 men to *determine their social position during early group formation, feel good, develop camaraderie,*

1 experience *respite* (i.e., from mental health concerns), *provide male inter-personal support in a*
2 *counter-intuitive way*, and after a period of developing familiarity, *'be themselves'*. Men could use
3 banter as a tool to *develop resilience* for themselves, but also enabled them to *provide support in*
4 *different ways, for different people*. Finally, banter provided a means to *reprimand inappropriate social*
5 *behaviour*. On the other hand, banter could cause 'trouble', through causing conflict and
6 misunderstandings, and this can be understood through a lens of critical narratives of progressiveness,
7 inclusiveness, and a 'changing culture'. As a tool for *determining one's position in the social hierarchy*,
8 banter had the capacity to do *harm*, by *positioning oneself against certain characteristics* (e.g.,
9 sexuality, appearance, age). Further, banter (and humour, more generally) is a tool that can be both
10 positive (i.e., enabling someone to feel good) and negative (i.e., trying to get under someone else's
11 skin) at the same time. In some stories, a parallel between pursuing more aggressive or 'offensive'
12 forms of humour and pleasure-seeking could be observed. For some, banter (and humour, more
13 broadly), can therefore have a complicated relationship to health. Finally, adopting a narrative of an
14 approach-orientation to one's problems allows men to deal with, and prevent misunderstandings
15 leading to group conflict, ultimately leading to enhanced group cohesion.

16 This analysis contextualises the role 'banter' plays in this men's health context. In our previous
17 study with this cohort (Budden et al., 2020), we conducted a reflexive thematic analysis of interviews
18 with players and coaches who were currently, or had previously participated in, the UK version of
19 MVFS. The aspects that participants appraised as driving the effectiveness of the program included the
20 appeal of sport, competition, being part of a team, and the opportunity to develop camaraderie with,
21 and experience accountability to, likeminded and similar men. Each of these themes were clearly
22 interrelated, and represented an overarching narrative of the program. Ultimately, the program provided
23 a gender-sensitized space for men, in that it appealed to and was tailored towards them, and men could
24 share issues (e.g., weight issues, mental health issues) with other men. Related to, and crucial for this
25 narrative, was a prevalent perception that traditional weight loss programs are tailored towards women.

1 In this study, we extend these findings by exploring how ‘banter’ is related to the narrative identified by
2 Budden and colleagues (2020).

3 As mentioned in the introduction, humour has been highlighted as a potential means of health
4 promotion in itself, but the notion that humour is universally positive has been criticized (see, for
5 example: Billig, 2005). Many humour theories exist, and it is beyond the scope of this article to
6 summarize these, but three are widely recognized (Billig, 2005; McCreddie & Wiggins, 2008; Meyer,
7 2000): (1) the relief theory of humour (Berlyne, 1972); (2) the superiority model of humour (Sully,
8 1902); and (3) incongruity models of humour (e.g., Deckers & Kizer, 1975; McGraw & Warren, 2010).
9 Readers are encouraged to consult Billig’s (2005) in-depth critique of these theories. While each theory
10 explains humour in certain instances, it is not clear that any theory accounts for humour in its entirety.
11 We propose, in line with other thinkers on this topic (e.g., Meyer, 2000), that it may be beneficial to
12 take a functional approach to humour—what does it do *for* people, and in this study, men in particular?
13 Meyer (2000) proposed that humour serves four functions in communication, uniting communicators
14 by serving *identification* and *clarification* functions, and dividing by serving *enforcement* and
15 *differentiation* functions. Broadly, humour can be socially positive or negative (Martineau, 1972).
16 Whether these functions are positive for an individual is subjective, and can only be understood as part
17 of a broader picture. The narratives that circulate in culture around such an individual will shape what
18 is considered good and dangerous in a given situation. Negative humour (i.e., humour that is
19 disparaging) typically serves the latter two functions by enforcing (group) norms, leveraging ridicule,
20 or punishing social non-compliance. This form (or role) of humour may not be an effective long-term
21 strategy—effective leaders make little use of negative humour (Martin & Gayle, 1999), and when
22 teachers use negative humour they are evaluated negatively by students (Wanzer et al., 2006).
23 Synthesizing overlap between the dominant theories of humour and functional models of humour,
24 Martin and colleagues (2007; 2003) developed a 2 x 2 conceptualization of the everyday functions of
25 humour. Firstly, humour is differentiated in terms of whether it enhances the self or others, and

1 secondly in terms of whether it is adaptive or maladaptive. Adaptive, other-oriented humour is
2 *affiliative*: playful, warm, and benevolent, and used to enhance relationships. Adaptive, self-oriented
3 humour is *self-enhancement*, and involves using humour “to enhance the self in a way that is tolerant
4 and non-detrimental to others” (p. 52). Maladaptive, other-oriented humour is *aggressive*, involves
5 hostile uses of humour, and is defined functionally as criticism that is expressed when socially
6 inappropriate (Martin, 2007). Finally, maladaptive, self-oriented humour is *self-defeating*, involving
7 “excessively self-disparaging humour, attempts to amuse others by doing or saying funny things at
8 one’s own expense” (Martin et al., p. 54) to gain social approval. This model enables us to
9 contextualize the findings of our study, discussed below.

10 By exploring, dialogically, men’s stories of banter, we hoped to derive insight into the more
11 contentious instances of humour that blur the lines between playfulness and aggression. Banter was
12 (almost universally) described by participants as navigating a ‘line’—a subjective barrier between
13 playful joking and out-right aggression that (generally) ought not to be crossed. Martin and colleagues
14 (2003) stressed that “the distinction between potentially benign and deleterious uses of humour is one
15 of degree, rather than dichotomy” (p.52). Essentially, playful humour can feature teasing, ‘ribbing’, and
16 a degree of disparagement—such as when one group enhances group identity and cohesion by making
17 fun of an outside group that poses threats to, or is disliked by, the group. The fact that playful humour
18 that features insults can be positive is illustrated by Kyle’s story: “That’s the kind of thing I love, where
19 you can take the p*ss out of each other.” While disparaging, this humour unites communicators.
20 Further, humour that looks aggressive, when interpreted in a certain ways, can actually be play, as
21 illustrated by Lucas: “I’m more inclined to rate the quality of your insults than worry about the
22 damaging effects of them”. Adopting this kind of attitude towards what could easily be interpreted as
23 aggressive and harmful could foster resilience, but also may be a coping mechanism.

24 Researchers have shed light on the differential outcomes associated with self-reported use of
25 each aforementioned style of humour in communication. Generally, adaptive humour (i.e., affiliative

1 and self-enhancement) is associated with positive outcomes for men and women, such as positive
2 personality impressions (Kuiper & Leite, 2010; Plessen et al., 2020), adaptive or positive self-
3 evaluative standards (Kuiper & McHale, 2009), improved mental health (Schneider, Voracek, & Tran,
4 2018) and stable affect, well-being, and resilience (Cann & Collette, 2014). Maladaptive forms of
5 humour (i.e., aggressive and self-defeating), generally, are related to negative outcomes such as
6 negative self-evaluative standards (Kuiper & McHale, 2009), and negative personality impressions
7 (Kuiper & Leite, 2010; Plessen et al., 2020). Nonetheless, as illustrated in Peter's story, there may be a
8 counter-intuitive relationship between aggressive humour and well-being, particularly for men in this
9 context. Dyck and Holtzman (2013) found that while adaptive humour was related positively to well-
10 being, and this relationship was mediated by greater perceived availability of social support (for men
11 and women), moderation analyses revealed that aggressive humour may be related to higher levels of
12 social support among men, but lower social support among women. Our results provide support for and
13 partially explain this finding.

14 Finally, the complicated relationship between banter (and humour, more broadly) and health,
15 illustrated by Dennis' story, relates to prior research linking aspects of personality to humour
16 appreciation. Researchers have previously explored the relationship between personality, humour
17 appreciation, and various health outcomes (e.g., Lourey & McLachlan, 2003; Ruch, 1988; Ruch &
18 Heintz, 2013). For example, Ruch (1988) observed a correlation between sensation seeking (e.g.,
19 experience seeking, boredom susceptibility, and disinhibition) and relatively low perceptions of
20 aversiveness (i.e., negative feelings) when observing nonsense humour (i.e., humour where the
21 punchline is unpredictable or highly incongruous, a central feature of incongruity theories of humour).
22 Ruch (1988) noted that the enjoyment of different content in humour may reflect a disposition to seek
23 out and enjoy different degrees of stimulus intensity and may reflect a basic personality characteristic
24 of sensation seeking. Sensation seekers may use humour to express a "need for intense, varied, novel
25 and complex stimulation" (p. 14). Further, sensation seeking is associated with more overt expressions

1 of humour appreciation, and finding a greater variety of situations as funny (Lourey & McLachlan,
2 2003).

3 **Recommendations for Future Research**

4 Follow-up interviews with participants in the future may be useful to understand change in
5 stories. Future work may also attend more closely to *how* banter develops in a group of men. An
6 unanswered question remains, what takes place first, ‘banter’, and with it open communication between
7 men, or developing a sense of familiarity? Our results suggest that in certain instances taking ‘risks’
8 with humour allows men to show ‘who they are’, and that leads to social connection, but this can, of
9 course, go wrong. Further insight, in particular in the form of ethnographic immersion, could answer
10 this question. Several potential avenues of future research may follow. Similar research with family
11 members could provide a deeper and broader understanding of the stories of men’s humour usage. For
12 example, to what extent does an individual modify their style of humour in different contexts, with
13 different group members, and to what end? Further, following one social unit (i.e., a team in a similar
14 type of program) in an ethnographic study could provide a means to explore the perceptions of all
15 people involved, and in relation to other forms of communication that occur in such a setting. This
16 would provide more insight into the development of humour in such groups. It is also worth
17 considering to what extent adaptive forms of humour can be trained (see, for example: Ruch &
18 Hofmann, 2017). Finally, although we presented a tentative definition of banter as humour that blurs
19 the line between playfulness and aggression, on the basis of prior research and the consistencies
20 between definitions provided by participants, our aim was to explore the functions of banter, rather than
21 comprehensively address issues of definition. Future researchers could explore this topic in-depth.

22 **Practical Implications**

23 This study highlights the variety of functions that banter may serve for participants in men’s
24 health contexts. The adoption of banter, in particular positive forms of banter, is a common tactic in
25 similar men’s health interventions (e.g., Bunn et al., 2016; Hunt et al., 2020; Gray et al., 2013). The

1 current study extends our understanding by exploring, in-depth, the multiple functions banter may
2 serve. Banter is not universally positive, and intervention developers ought to be aware of both the
3 potential positive and negative forms of banter, and the effects banter can have on and for men. Banter
4 can bring men together, help them feel good, provide respite from responsibilities and mental health
5 issues, and enable them to be themselves—making light of one’s own or others’ troubles with like-
6 minded others can alleviate stress and provide a sense of validation. However, developers of men’s
7 health interventions should be mindful that, at times, banter may blur the line between playfulness and
8 aggression, and accordingly, may isolate or offend. Incorporating humour into intervention design
9 appears, on the whole, to be attractive to men, and this in part reflects norms around masculinities.
10 Intervention developers are encouraged to address this issue by explicitly highlighting the potential
11 positive and negatives effects of banter, for example, during initial meet-and-greet sessions and the
12 formative stages of group development. Acknowledging that playful and well-meaning humour can at
13 times look aggressive—featuring teasing, ribbing, and often insults—may help manage people’s
14 appraisals of (and reactions to) such episodes and could alleviate potential conflict.

15 In this study, three factors appeared to frequently shape people’s interpretations of contentious
16 humour, including context (i.e., whether contentious humour is appropriate in a given social
17 environment or situation), intentions (i.e., the perceived intent behind someone else’s humour), and
18 familiarity (i.e., the extent to which people know each other and have a shared understanding of one
19 another’s personality). Addressing these issues during group formation may help to establish
20 appropriate norms regarding how, when, and with whom participants may want to use certain kinds of
21 banter. Fostering an environment where men feel comfortable voicing concerns about, and potential
22 offense caused by, someone’s use of humour is also crucial. An inclusive approach to men’s health
23 intervention design should support (rather than restrict) the use of humour, but should also protect
24 against misinterpretations, embarrassment, or withdrawal that may result from appraisals of more
25 contentious uses of banter.

References

- 1
- 2 Berlyne, D. E. (1972). Humour and its kin. In J. H. Goldstein & P. E. McGhee (Eds.), *The psychology*
3 *of humor: Theoretical perspectives and empirical issues*, 43-60. New York: Academic Press.
- 4 Billig, M. (2005). *Laughter and ridicule: Towards a social critique of humour*: Sage.
- 5 Booth-Butterfield, S., & Booth-Butterfield, M. (1991). Individual differences in the communication of
6 humorous messages. *Southern Journal of Communication*, 56(3), 205-218.
7 doi:10.1080/10417949109372831
- 8 Budden, T., Dimmock, J. A., Smith, B., Beauchamp, M., Rosenberg, M., & Jackson, B. (2020).
9 Overweight and obese men's experiences in a sport-based weight loss intervention for men.
10 *Psychology of Sport and Exercise*, 50, 101750.
11 doi:<https://doi.org/10.1016/j.psychsport.2020.101750>
- 12 Bunn, C., Wyke, S., Gray, C. M., Maclean, A., & Hunt, K. (2016). 'Coz football is what we all have':
13 masculinities, practice, performance and effervescence in a gender-sensitised weight-loss and
14 healthy living programme for men. *Sociology of Health & Illness*, 38(5), 812-828.
- 15 Buss, D. M. (1988). The evolution of human intrasexual competition: tactics of mate attraction. *Journal*
16 *of Personality and Social Psychology*, 54(4), 616-628. doi:10.1037/0022-3514.54.4.616
- 17 Cann, A., & Collette, C. (2014). Sense of humor, stable affect, and psychological well-being. *Europe's*
18 *Journal of Psychology*, 10(3), 464-479. doi:10.5964/ejop.v10i3.746
- 19 Cernerud, L., & Olsson, H. (2004). Humour seen from a public health perspective. *Scandinavian*
20 *Journal of Public Health*, 32(5), 396-398. doi:10.1080/14034940410026895
- 21 Deckers, L., & Kizer, P. (1975). Humor and the incongruity hypothesis. *The Journal of Psychology*,
22 90(2), 215-218. doi:10.1080/00223980.1975.9915778
- 23 Douglas, K., & Carless, D. (2014). *Life story research in sport: Understanding the experiences of elite*
24 *and professional athletes through narrative*: Routledge.

- 1 Dyck, K. T. H., & Holtzman, S. (2013). Understanding humor styles and well-being: The importance of
2 social relationships and gender. *Personality and Individual Differences*, 55(1), 53-58.
3 doi:10.1016/j.paid.2013.01.023
- 4 Francis, L., Monahan, K., & Berger, C. (1999). A laughing matter? The uses of humor in medical
5 interactions. *Motivation and Emotion*, 23(2), 155-174. doi:10.1023/A:1021381129517
- 6 Frank, A. W. (1995). *The wounded storyteller: body, illness, and ethics*. Chicago: University of
7 Chicago Press.
- 8 Frank, A. W. (2002). Why study people's stories? The dialogical ethics of narrative analysis.
9 *International Journal of Qualitative Methods*, 1(1), 109-117.
10 doi:10.1177/160940690200100102
- 11 Frank, A. W. (2012). Practicing dialogical narrative analysis. *Varieties of Narrative Analysis*, 33-52.
12 doi:10.4135/9781506335117.n3
- 13 Geisler, F. C. M., Wiedig-Allison, M., & Weber, H. (2009). What coping tells about personality.
14 *European Journal of Personality: Published for the European Association of Personality*
15 *Psychology*, 23(4), 289-306. doi:10.1002/per.709
- 16 Gray, C. M., Hunt, K., Mutrie, N., Anderson, A. S., Leishman, J., Dalgarno, L., & Wyke, S. (2013).
17 Football Fans in Training: the development and optimization of an intervention delivered
18 through professional sports clubs to help men lose weight, become more active and adopt
19 healthier eating habits. *BMC Public Health*, 13(1), 1-17.
- 20 Griffin, M., & Phoenix, C. (2016). Becoming a runner: big, middle and small stories about physical
21 activity participation in later life. *Sport, Education and Society*, 21(1), 11-27.
22 doi:10.1080/13573322.2015.1066770
- 23 Hunt, K., Wyke, S., Bunn, C., Donnachie, C., Reid, N., & Gray, C. M. (2020). Scale-up and scale-out
24 of a gender-sensitized weight management and healthy living program delivered to overweight

- 1 men via professional sports clubs: the wider implementation of Football Fans in Training
 2 (FFIT). *International Journal of Environmental Research and Public Health*, 17(2), 584.
- 3 Hunt, K., Wyke, S., Gray, C. M., Anderson, A. S., Brady, A., Bunn, C., . . . Treweek, S. (2014). A
 4 gender-sensitised weight loss and healthy living programme for overweight and obese men
 5 delivered by Scottish Premier League football clubs (FFIT): a pragmatic randomised controlled
 6 trial. *The Lancet*, 383(9924), 1211-1221. doi:10.1016/S0140-6736(13)62420-4
- 7 Kuiper, N. A., & Leite, C. (2010). Personality impressions associated with four distinct humor styles.
 8 *Scandinavian Journal of Psychology*, 51(2), 115-122. doi:10.1111/j.1467-9450.2009.00734.x
- 9 Kuiper, N. A., & McHale, N. (2009). Humor styles as mediators between self-evaluative standards and
 10 psychological well-being. *The Journal of Psychology*, 143(4), 359-376.
 11 doi:10.3200/JRLP.143.4.359-376
- 12 Kwasnicka, D., Ntoumanis, N., Hunt, K., Gray, C. M., Newton, R. U., Gucciardi, D. F., . . . Kerr, D. A.
 13 (2020). A gender-sensitised weight-loss and healthy living program for men with overweight
 14 and obesity in Australian Football League settings (Aussie-FIT): A pilot randomised controlled
 15 trial. *PLoS Medicine*, 17(8), e1003136. doi:10.1371/journal.pmed.1003136
- 16 Lourey, E., & McLachlan, A. (2003). Elements of sensation seeking and their relationship with two
 17 aspects of humour appreciation—perceived funniness and overt expression. *Personality and*
 18 *Individual Differences*, 35(2), 277-287. doi:10.1016/S0191-8869(02)00188-5
- 19 Maddison, R., Hargreaves, E. A., Wyke, S., Gray, C. M., Hunt, K., Heke, J. I., . . . Marsh, S. (2019).
 20 Rugby Fans in Training New Zealand (RUFIT-NZ): a pilot randomized controlled trial of a
 21 healthy lifestyle program for overweight men delivered through professional rugby clubs in
 22 New Zealand. *BMC Public Health*, 19. doi:10.1186/s12889-019-6472-3
- 23 Martin, D. M., & Gayle, B. M. (1999). It isn't a matter of just being funny: Humor production by
 24 organizational leaders. *Communication Research Reports*, 16(1), 72-80.
 25 doi:10.1080/08824099909388703

- 1 Martin, R. A. (2007). *The psychology of humor : an integrative approach*. Amsterdam: Elsevier
2 Academic.
- 3 Martin, R. A., & Kuiper, N. A. (1999). Daily occurrence of laughter: Relationships with age, gender,
4 and Type A personality. *Humor, 12*(4), 355-384.
- 5 Martin, R. A., Puhlik-Doris, P., Larsen, G., Gray, J., & Weir, K. (2003). Individual differences in uses
6 of humor and their relation to psychological well-being: Development of the Humor Styles
7 Questionnaire. *Journal of Research in Personality, 37*(1), 48-75. doi:10.1016/S0092-
8 6566(02)00534-2
- 9 Martineau, W. H. (1972). A model of the social functions of humor. In *The psychology of humor:*
10 *Theoretical perspectives and empirical issues* (pp. 101-125).
- 11 McCreddie, M., & Wiggins, S. (2008). The purpose and function of humour in health, health care and
12 nursing: a narrative review. *Journal of Advanced Nursing, 61*(6), 584-595. doi:10.1111/j.1365-
13 2648.2007.04548.x
- 14 McGraw, A. P., & Warren, C. (2010). Benign violations: Making immoral behavior funny.
15 *Psychological Science, 21*(8), 1141-1149. doi:10.1177/0956797610376073
- 16 Meyer, J. C. (2000). Humour as a Double-Edged Sword: Four Functions of Humor in Communication.
17 *Human Communication Research, 10*(3), 310-331. doi:10.1111/j.1468-2885.2000.tb00194.x
- 18 Oliffe, J. L., Ogrodniczuk, J., Bottorff, J. L., Hislop, T. G., & Halpin, M. (2009). Connecting humor,
19 health, and masculinities at prostate cancer support groups. *Psycho-Oncology: Journal of the*
20 *Psychological, Social and Behavioural Dimensions of Cancer, 18*(9), 916-926.
21 doi:10.1002/pon.1415
- 22 Plessen, C. Y., Franken, F. R., Ster, C., Schmid, R. R., Wolfmayr, C., Mayer, A.-M., . . . Kotlyar, E.
23 (2020). Humor styles and personality: A systematic review and meta-analysis on the relations
24 between humor styles and the Big Five personality traits. *Personality and Individual*
25 *Differences, 154*, 109676. doi:10.1016/j.paid.2019.109676

- 1 Robertson, C., Archibald, D., Avenell, A., Douglas, F., Hoddinott, P., Van Teijlingen, E., . . . Fioratou,
2 E. (2014). Systematic reviews of and integrated report on the quantitative, qualitative and
3 economic evidence base for the management of obesity in men. *Health Technology Assessment*
4 *(Winchester, England)*, 18(35), 1-424. doi:10.3310/hta18350
- 5 Ruch, W. (1988). Sensation seeking and the enjoyment of structure and content of humour: Stability of
6 findings across four samples. *Personality and Individual Differences*, 9(5), 861-871.
7 doi:10.1016/0191-8869(88)90004-9
- 8 Ruch, W., & Heintz, S. (2013). Humour styles, personality and psychological well-being: What's
9 humour got to do with it? *European Journal of Humour Research*, 1(4), 1-24.
10 doi:10.7592/ejhr2013.1.4.ruch
- 11 Schneider, M., Voracek, M., & Tran, U. S. (2018). "A joke a day keeps the doctor away?" Meta -
12 analytical evidence of differential associations of habitual humor styles with mental health.
13 *Scandinavian Journal of Psychology*, 59(3), 289-300. doi:10.1111/sjop.12432
- 14 Smith, B. (2016). Narrative analysis. In E. Lyons & A. Coyle (Eds.), *Analysing qualitative data in*
15 *psychology* (2 ed., pp. 202-221). London: Sage.
- 16 Smith, B., & Monforte, J. (2020). Stories, new materialism and pluralism: Understanding, practising
17 and pushing the boundaries of narrative analysis. *Methods in Psychology*, 2, 100016.
18 doi:10.1016/j.metip.2020.100016
- 19 Smith, J. A., Braunack-Mayer, A. J., Wittert, G. A., & Warin, M. J. (2008). Qualities men value when
20 communicating with general practitioners: implications for primary care settings. *Medical*
21 *Journal of Australia*, 189(11-12), 618-621. doi:10.5694/j.1326-5377.2008.tb02214.x
- 22 Sparkes, A. C. (2005). Narrative analysis: exploring the whats and hows of personal stories. In
23 *Qualitative research in health care* (Vol. 1, pp. 191-209).

- 1 Sparkes, A. C., & Smith, B. (2013). *Qualitative Research Methods in Sport, Exercise and Health :*
2 *From Process to Product.* London, United Kingdom: Routledge.
- 3 Sully, J. (1902). *An essay on laughter: Its forms, its causes, its development and its value:* Longmans,
4 Green, and Company.
- 5 Wanzer, M., Frymier, A. B., Wojtaszczyk, A. M., & Smith, T. (2006). Appropriate and Inappropriate
6 Uses of Humor by Teachers. *Communication Education, 55*(2), 178-196.
7 doi:10.1080/03634520600566132
- 8 Wanzer, M. B., Booth-Butterfield, M., & Booth-Butterfield, S. (1996). Are funny people popular? An
9 examination of humor orientation, loneliness, and social attraction. *Communication Quarterly,*
10 *44*(1), 42-52. doi:10.1080/01463379609369999
- 11 Williams, R. (2009). ‘Having a laugh’: masculinities, health and humour. *Nursing inquiry, 16*(1), 74-81.
12 doi:10.1111/j.1440-1800.2009.00437.x
- 13 Wyke, S., Hunt, K., Gray, C., Fenwick, E., Bunn, C., Donnan, P., . . . Boyer, N. (2015). Football fans in
14 training (FFIT): a randomised controlled trial of a gender-sensitised weight loss and healthy
15 living programme for men. *Public Health Research, 3*(2), 1-129. doi:10.3310/phr03020
16